

STATE OF UTAH

FORM 3

DEPARTMENT OF NATURAL RESOURCES
DEPARTMENT OF OIL, GAS AND MININGAMENDED REPORT ☐
(highlight changes)

| APPLICATION FOR PERMIT TO DRILL | | 5. MINERAL LEASE NO: SL 045051b | 6. SURFACE: FEDERAL |
|--|---|--|------------------------|
| 1A. TYPE OF WORK DRILL <input checked="" type="checkbox"/> REENTER <input type="checkbox"/> DEEPEN <input type="checkbox"/> | 7. IF INDIAN, ALLOTTEE OR TRIBE NAME: N/A | | |
| B. TYPE OF WELL: OIL <input type="checkbox"/> GAS <input checked="" type="checkbox"/> OTHER _____ SINGLE ZONE <input checked="" type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/> | 8. UNIT or CA AGREEMENT NAME: CLAY BASIN | | |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | | 9. NAME OF WELL and NUMBER CLAY BASIN UNIT NO. 66 | |
| 3. ADDRESS OF OPERATOR: P.O. BOX 458 CITY ROCK SPRINGS STATE WY ZIP 82902 | | PHONE NUMBER: 307 382-9791 | |
| 4. LOCATION OF WELLS (FOOTAGES) AT SURFACE: 650673X 4538625Y 40.981399 -109.209036 AT PRODUCING ZONE: 2154' FSL 1974' FEL | | 10. FIELD AND POOL, OR WILDCAT: CLAY BASIN | |
| 14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE: APPROXIMATELY 7 MILES FROM DUTCH JOHN, UTAH | | 11. QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: NW SE 21-3N-24E, SLB&M | |
| 15. DISTANCE TO NEAREST PROPERTY OR LEASE LINE (FEET) 490' | 16. NUMBER OF ACRES IN LEASE: 1,777.42 | 17. NUMBER OF ACRES ASSIGNED TO THIS WELL: N/A | |
| 18. DISTANCE TO NEAREST WELL (DRILLING, COMPLETED, OR APPLIED FOR) ON THIS LEASE (FEET) 2400' | 19. PROPOSED DEPTH: 5,530' | 20. BOND DESCRIPTION: Nationwide Bond No. 965002976 | |
| 21. ELEVATIONS (SHOW WHETHER DF, RT, GR, ETC.) 6359' ungraded | 22. APPROXIMATE DATE WORK WILL START: September 15, 2008 | 23. ESTIMATED DURATION: 25 DAYS | |

| 24. PROPOSED CASING AND CEMENTING PROGRAM | | | |
|---|---|---------------|---|
| SIZE OF HOLE | CASING SIZE, GRADE, AND WEIGHT PER FOOT | SETTING DEPTH | CEMENT TYPE, QUANTITY, YIELD, AND SLURRY WEIGHT |
| 24" | 20" - CORRUGATED CONDUCTOR | 60' | 40 CUBIC YARD CONSTRUCTION CEMENT |
| 12-1/4" | 9-5/8" 36#, K-55, ST&C | 500' | SEE ATTACHED DRILLING PLAN |
| 7-7/8" | 4-1/2" 13.5#, P-110, LT&C | 5,530' | SEE ATTACHED DRILLING PLAN |
| | | | |
| | | | |
| | | | |
| | | | |

| 25. ATTACHMENTS | |
|---|--|
| VERIFY THE FOLLOWING ARE ATTACHED IN ACCORDANCE WITH THE UTAH OIL AND GAS CONSERVATION GENERAL RULES: | |
| <input checked="" type="checkbox"/> WELL PLAT OR MAP PREPARED BY LICENSED SURVEYOR OR ENGINEER | <input checked="" type="checkbox"/> COMPLETE DRILLING PLAN |
| <input type="checkbox"/> EVIDENCE OF DIVISION OF WATER RIGHTS APPROVAL FOR USE OF WATER | <input type="checkbox"/> FORM 5, IF OPERATOR IS PERSON OR COMPANY OTHER THAN THE LEASE OWNER |

NAME (PLEASE PRINT) G. J. NIMMO

TITLE OPERATIONS MANAGER

SIGNATURE

DATE

(This space for State use only)

API NUMBER ASSIGNED

Approved by the
Utah Division of
Oil, Gas and Mining

APPROVAL:

Date:

(See Instructions on Reverse Side)

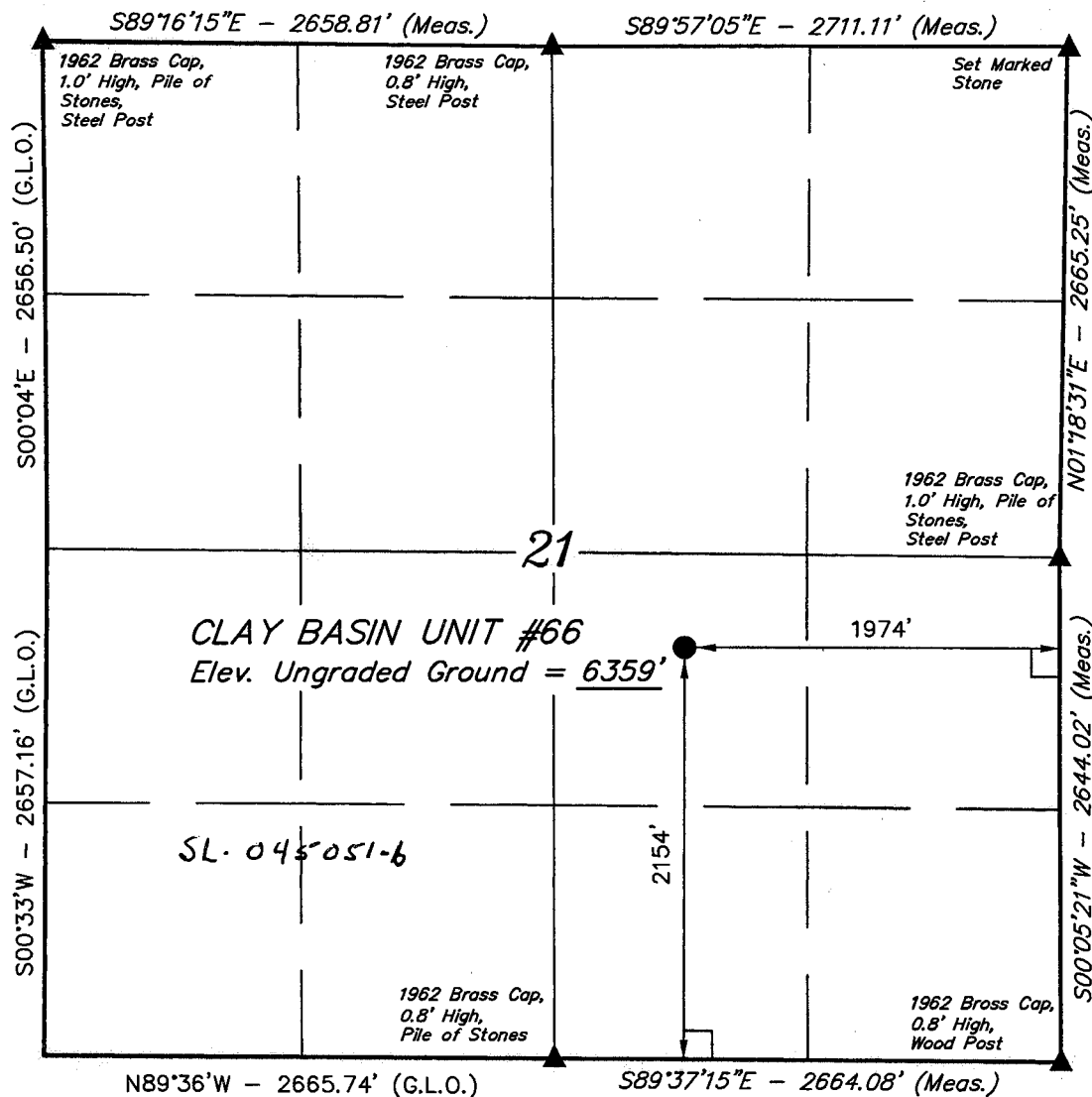
By:

RECEIVED

FEB 27 2008

DIV. OF OIL, GAS & MINING

T3N, R24E, S.L.B.&M.



BASIS OF BEARINGS

BASIS OF BEARINGS IS A G.P.S. OBSERVATION.

(AUTONOMOUS NAD 83)
 LATITUDE = 40°58'52.75" (40.981319)
 LONGITUDE = 109°12'34.93" (109.209703)
 (AUTONOMOUS NAD 27)
 LATITUDE = 40°58'52.90" (40.981361)
 LONGITUDE = 109°12'32.47" (109.209019)

LEGEND:

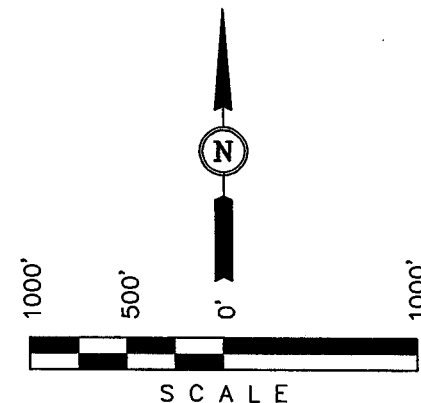
- └─┘ = 90° SYMBOL
- = PROPOSED WELL HEAD.
- ▲ = SECTION CORNERS LOCATED.

WEXPRO COMPANY

Well location, CLAY BASIN UNIT #66, located as shown in the NW 1/4 SE 1/4 of Section 21, T3N, R24E, S.L.B.&M., Daggett County, Utah.

BASIS OF ELEVATION

BENCH MARK LOCATED IN THE NE 1/4 NW 1/4 OF SECTION 28, T3N, R24E, S.L.B.&M. TAKEN FROM THE CLAY BASIN, QUADRANGLE, UTAH, DAGGETT COUNTY, 7.5 MINUTE QUAD. (TOPOGRAPHIC MAP) PUBLISHED BY THE UNITED STATES DEPARTMENT OF THE INTERIOR, GEOLOGICAL SURVEY. SAID ELEVATION IS MARKED AS BEING 6313 FEET.



CERTIFICATE

THIS IS TO CERTIFY THAT THE ABOVE PLAT WAS PREPARED FROM FIELD NOTES OF ACTUAL SURVEYS MADE BY ME OR UNDER MY SUPERVISION AND THAT THE SAME ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

[Signature]
 REGISTERED LAND SURVEYOR
 REGISTRATION NO. 16139
 STATE OF UTAH

UTAH ENGINEERING & LAND SURVEYING

85 SOUTH 200 EAST - VERNAL, UTAH 84078

(435) 789-1017

| | | | |
|----------------|----------------|----------------|-------------|
| SCALE | 1" = 1000' | DATE SURVEYED: | DATE DRAWN: |
| | | 10-26-07 | 11-06-07 |
| PARTY | REFERENCES | | |
| T.A. D.H. L.K. | G.L.O. PLAT | | |
| WEATHER | FILE | | |
| COOL | WEXPRO COMPANY | | |

**Drilling Plan
Wexpro Company
Clay Basin Unit Well No. 66
Daggett County, Utah**

1. SURFACE FORMATION, ESTIMATED TOPS AND WATER, OIL, GAS OR MINERAL BEARING FORMATIONS:

| Formation | Depth | Remarks |
|--------------------|---------|--------------------------|
| Mancos | Surface | |
| Frontier | 5,220' | |
| A Sand | 5,232' | Gas, Secondary Objective |
| B Sand | 5,238' | Gas, Major Objective |
| C Sand | 5,286' | Gas, Major Objective |
| D Sand | 5,316' | Gas, Major Objective |
| Mowry | 5,430' | |
| Total Depth | 5,530' | |

All fresh water and prospectively valuable minerals encountered during drilling, will be recorded by depth and adequately protected.

2. PRESSURE CONTROL EQUIPMENT: (See attached diagram) Operator's minimum specifications for pressure control equipment require an 11-inch 3000 psi double gate hydraulically operated blowout preventer and an 11-inch 3000 psi annular preventer. BOP equipment will be tested to its rated working pressure or 70-percent of the internal yield of the surface casing. The annular preventer will be tested at 50-percent of its rated working pressure.

NOTE: The surface casing will be pressure tested to a minimum of 1500 psi. BOP's will be checked daily as to mechanical operating condition and will be tested by rig equipment after each string of casing is run. All ram type preventers will have hand wheels which will be operative and accessible at the time the preventers are installed.

AUXILIARY EQUIPMENT:

- a. Manually operated kelly cock
- b. No floats at bit
- c. Monitoring of mud system will be with PVT system
- d. Full opening floor valves in the full open position, capable of fitting all drill stem connections manually operated

e. Formation integrity test will be done 20' below surface casing shoe to 11.0 ppg

3. CASING PROGRAM:

| Size | Top | Bottom | Weight | Grade | Thread | Condition |
|--------|-----|--------|--------|-------|--------|-----------------|
| 20' | sfc | 60' | | | | Steel Conductor |
| 9-5/8" | sfc | 500' | 36 | K55 | STC | New |
| 4-1/2" | sfc | 5,530' | 13.5 | P110 | LTC | New |

| Casing Strengths: | | | | Collapse | Burst | Tensile (minimum) |
|-------------------|----------|------|-----|------------|------------|----------------------|
| 9-5/8" | 36 lb. | K55 | STC | 2,020 psi | 3,520 psi | 423,000 lb. |
| 4-1/2" | 13.5 lb. | P110 | LTC | 10,680 psi | 12,410 psi | 338,000 lb |

(See attached casing design sheet)

CEMENTING PROGRAMS:

9-5/8-inch Surface Casing: 333 cu.ft. of Class G with 2% CaCl₂ (1/4% celloflake will only be used if lost circulation is encountered).

4-1/2-inch Production Casing: 1976 cu. ft Light / Class G with reducer and fluid loss additives, if needed.

4. MUD PROGRAM: Surface to 500 feet will be drilled with a rat hole rig. Fresh water with gels and polymer sweeps, as necessary from 500 feet to Total Depth. . Mud up, mud weight of 9.0 - 10.0 ppg, should be accomplished by 4500 feet to drill from the Frontier to total depth.

Sufficient mud materials to maintain mud properties, control lost circulation and to contain blowout will be available at the wellsite.

No chrome constituent additives will be used in the mud system on Federal and Indian lands without prior BLM approval to ensure adequate protection of fresh water aquifers.

5. LOGGING: DIL-GR-Micro Log - Total Depth to surface casing
FDC/CNL/GR/PE/CAL - Total Depth to surface casing
BHC- Sonic /Caliper - Total Depth to surface casing
RFT (or comparable) - Total Depth to Wasatch top @ 5250'

TESTING: None

CORING: None

6. ABNORMAL PRESSURE AND TEMPERATURE: No abnormal pressures are anticipated. A BHT of 124 degrees F.
7. ANTICIPATED STARTING DATE: September 15, 2008

DURATION OF OPERATION: 25 days

CLAY BASIN UNIT WELL NO. 66

SURFACE CASING:

| | | | |
|---------------|----------------------|----------------------|-----------|
| CASING: | 9-5/8", 36#, K-55 | 0.4340 cu.ft./lin.ft | |
| ANNULUS: | 12-1/4" (Guage Hole) | 0.3132 cu.ft./lin.ft | |
| EXCESS: | | 100% | |
| CEMENT YIELD: | LEAD | 2.56 cu.ft./sack | 11.6 PPG |
| | TAIL | 1.15 cu.ft./sack | 15.8 PPG |
| TOTAL DEPTH | | 500 Feet | |
| TOP OF TAIL | | Feet | |
| TOP OF LEAD | | 0 Feet | (Surface) |

LEAD SLURRY

CU.FT

| | | | | | | |
|------------|------|---|--------|------|---------|----------|
| ANN | 0 TO | 0 | 0.3132 | 0.00 | | |
| ANN EXCESS | | | 100% | 0.00 | | |
| | | | | 0.00 | 0 SACKS | 0 CU.FT. |

TAIL SLURRY

CU.FT

| | | | | | | |
|------------|--------|-----|--------|--------------|-----------|------------|
| CSG | 500 TO | 455 | 0.4340 | 19.53 | | |
| ANN | 500 TO | - | 0.3132 | 156.6 | | |
| ANN EXCESS | | | 100% | 156.6 | | |
| | | | | 332.73 | 289 SACKS | 333 CU.FT. |
| | | | | DISPLACEMENT | 35.2 BBLs | |

PRODUCTION CASING:

| | | | |
|---------------|------------------------------|-----------------------------|--|
| CASING: | 4-1/2", 13.5#, P-110 | 0.0838 cu.ft./lin.ft | |
| ANNULUS: | 9-1/4" (From Open Hole Logs) | 0.3562 cu.ft./lin.ft | |
| | | 0.3236 cu.ft./lin.ft | |
| EXCESS: | | 10% | |
| CEMENT YIELD: | LEAD | 2.41 cu.ft./sack - 11.6 PPG | |
| | TAIL | 1.50 cu.ft./sack - 14.2 PPG | |
| TOTAL DEPTH | | 5,534 Feet | |
| TOP OF TAIL | | 500 Feet | |
| TOP OF LEAD | OPEN HOLE | 500 | |
| | SURFACE CASING | SURFACE Feet | |

LEAD SLURRY

CU.FT

| | | | | | | |
|------------|--------|-----|--------|------|---------|----------|
| ANN | 500 TO | 500 | 0.3562 | 0.00 | | |
| | 500 TO | 500 | 0.3236 | 0.00 | | |
| ANN EXCESS | | | 10% | 0.00 | | |
| | | | | 0.00 | 0 SACKS | 0 CU.FT. |

TAIL SLURRY

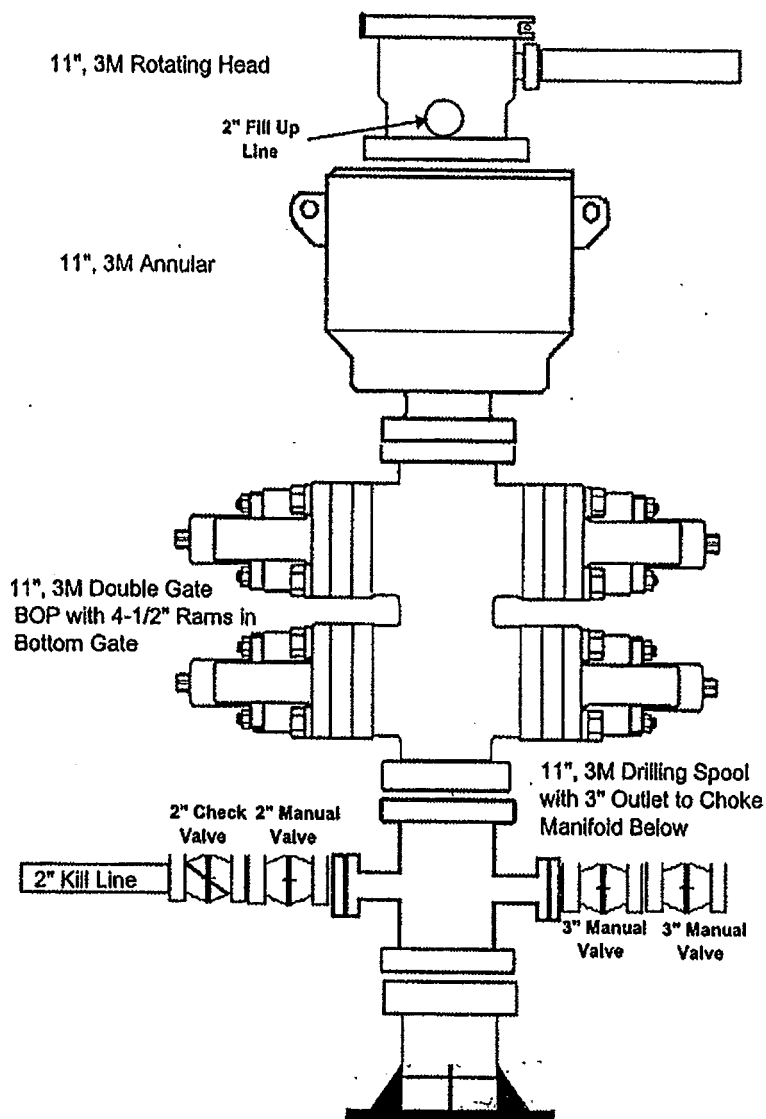
CU.FT

| | | | | | | |
|------------|----------|-------|--------|--------------|------------|-------------|
| CSG | 5,534 TO | 5,489 | 0.0838 | 3.771 | | |
| ANN | 5,534 TO | 500 | 0.3562 | 1793.1 | | |
| ANN EXCESS | | | 10% | 179.31 | | |
| | | | | 1976.19 | 1317 SACKS | 1976 CU.FT. |
| | | | | DISPLACEMENT | 81.9 BBLs | |

QUESTAR WEXPRO

3,000 psi BOP

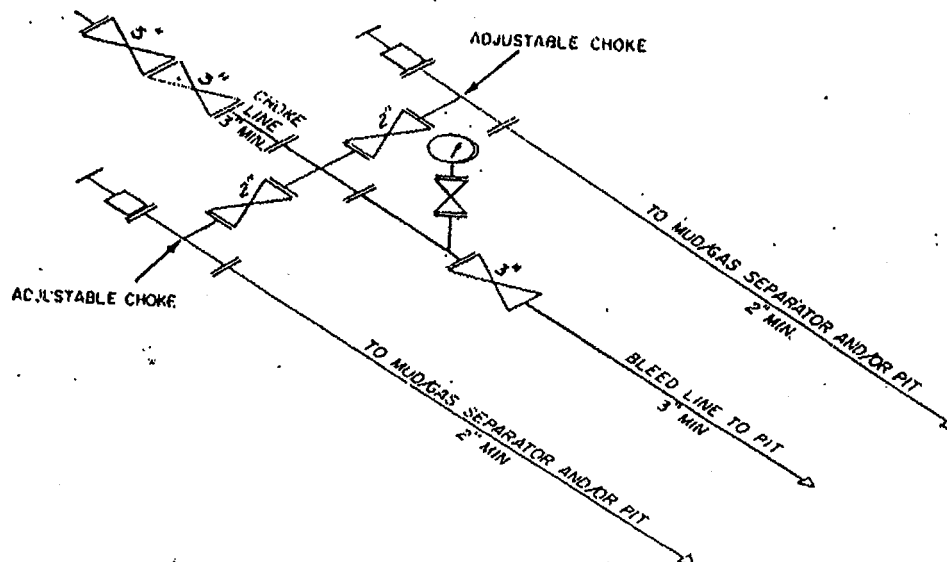
Minimum Requirements



3M CHOKE MANIFOLD EQUIPMENT — CONFIGURATION MAY VARY

46812

Federal Register / Vol. 53, No. 223 / Friday, November 18, 1988 / Rules and Regulations



**Surface Use and Operations
Wexpro Company
Clay Basin Unit Well No. 66
Daggett County, Utah**

1. Existing Road:
 - A. Proposed Well Site as Staked: Refer to well location plat and area map.
 - B. Proposed Access Route: Refer to general area map. All access roads are within lease boundaries.
 - C. Plans for Improvement and/or Maintenance: All existing roads utilized will be maintained in their present condition and no improvements will be made.
2. Planned Access Roads:
 - A. The existing road of approximate 130 feet of newly constructed road connecting the existing road to the drilling pad will necessitate a 30-foot wide right-of-way (maximum disturbance).
 - B. Maximum grade: Will not exceed 10 percent.
 - C. Turnouts: Water turnouts will be constructed as required to divert runoff water from the road ditch in such a manner as to not cause erosion.
 - D. Location (centerline): Access road has been staked and flagged. Surface disturbance and vehicular travel will be limited to the approved access route, additional area needed will be approved in advance.
 - E. One 18" CMP is required where the access road leaves the existing road.
 - F. Surface materials: Surface materials will be obtained from cuts along the access road and location. Spot surfacing may be required to maintain the running surface.
 - G. Any topsoil (approximately 6-inches) removed in conjunction with road construction will be spread in the borrow ditches or windrowed to the side. Borrow areas will be seeded as discussed in reclamation procedures.
3. Location of Existing Wells: Refer to area map for the location of existing wells within a one-mile radius.
4. Location of Existing and/or Proposed Facilities: Refer to area maps. Facilities will be installed as detailed on the attached diagram.

All permanent (onsite for six months or longer) structures constructed or installed will be painted Shale Green, a flat, non-reflective, earth tone color to match the standard environmental colors, as determined by the Rocky Mountain Five State Interagency Committee. All facilities will be painted within six months of installation. Facilities required to comply with Occupational Safety and Health Act will be excluded.

If a tank battery is constructed on this lease, it will be surrounded by a dike of sufficient capacity to contain one-and-a-half times the storage capacity of the battery.

All loading lines will be placed inside the berm surrounding the tank battery.

All site security guidelines identified in 43 CFR 3162.7 regulations will be adhered to.

All off-lease storage, off-lease measurement, or commingling on-lease or off-lease will have prior written approval from Authorized Officer.

Pipeline

The proposed pipeline will be constructed and operated by Questar Gas Management Company. The pipeline will be approximately 955' in length. The proposed surface pipeline will be 3.5 O.D., Grade B or X-42 with a 0.188-inch wall thickness. The road crossing will be buried to a depth of 48-inches below the borrow area of the road and will tie in to the existing buried pipeline as shown on the attached Topo D. The width of the right-of-way requested is 50 feet for construction and will revert to 30 feet for operation and maintenance purposes. The surface pipeline will be either brown or black in color and the buried pipeline will be wrapped.

The maximum operating pressure that the natural gas pipeline is designed for is 1170 psig. Associated facilities include above ground valves and piping at the lateral junctions.

5. Location and Type of Water Supply: Water will be hauled by tank trucks from the town of Rock Springs, Wyoming or from Red Creek.
6. Source of Construction Materials: All materials will be derived from cuts at the location and along the access road. Construction material will be located on lease.
7. Methods for Handling Water Disposal: Cuttings and drilling fluids will be placed in a lined mud pit which will be constructed with at least one half of its holding capacity below ground level. The mud pit will be fenced on three sides with a sheep-tight fence of woven wire prior to the onset of drilling. Immediately upon completion of drilling, the fourth side will be fenced and the liquids allowed to evaporate. The fence will be maintained until restoration. Any produced liquids will be contained in test tanks and hauled out by tank trucks. Garbage and other waste materials will be placed in a trash

cage, the contents of which will be disposed of in the nearest legal landfill. Portable sewage facilities will be utilized for the disposal of human waste.

Produced waste water will be confined to a lined pit for a period not to exceed 90 days after initial production. Produced water will be confined to a 400 barrel tank on location and application for approval of a permanent disposal method and location will be submitted for the Authorized Officer's approval.

8. Ancillary Facilities: Camp facilities will not be required.
9. Wellsite Layout: Refer to drawing.
10. Plans for Restoration of the Surface: During construction, all woody vegetation and the top six-inches of topsoil material will be removed from the pad and stockpiled separately. All pits will remain fenced until cleanup begins. Overhead flagging will be installed if oil is in the mud pit.

Immediately upon completion of drilling, the location and surrounding area will be cleared of all debris, materials, trash and junk not required for production. The reserve pit and that portion of the location and access road not needed for production or production facilities will be reclaimed.

Before any dirt work to restore the location takes place, the reserve pit will be completely dry and all cans, barrels, pipe, etc. will be removed. All disturbed areas will be recontoured to the approximate natural contours to the satisfaction of the Authorized Officer.

The stockpiled topsoil will be evenly distributed over the disturbed areas. Prior to reseeding, all disturbed areas, including the access roads, will be scarified and left with a rough surface. Reseeding will be done in the fall before ground frost.

A seed drill equipped with a regulator will be required. Seed will be drilled 1/4-1/2 inch deep on the contour using the following seed mixture specified by the Bureau of Land Management.

| Species | lbs. PLS/acre |
|--------------------|------------------------|
| Shadscale | 4 lbs PLS/acre |
| Gardner's Saltbush | 4 lbs PLS/acre |
| Blue Gramma Grass | 4 lbs PLS/acre |
| Wyoming Big Sage | 1 lbs PLS/acre |
| Total | 13 lbs PLS/acre |

The Wyoming Big Sage Brush will be broadcast after the drill seeding of all other species. Where drilling is not possible a broadcast/rake method will be used doubling the seed mixture.

11. Surface and Mineral Ownership: Surface ownership along the access road is federal and surface ownership at the wellsite is federal.
12. Other Information: Anna Figueroa of the Bureau of Land Management, Vernal Field Office in Vernal, Utah will be notified at least 72-hours prior to commencement of both construction and reclamation operations.

A Class III Cultural Resource Inventory will be completed and the report forwarded to the Bureau of Land Management.

No chemicals subject to reporting under SARA Title III in an amount equal to or greater than 10,000 pounds will be used, produced, stored, transported, or disposed of annually in association with the drilling of this well. Furthermore, no extremely hazardous substances, as defined in 40 CFR 355, in threshold planning quantities, will be used, produced, stored, transported, or disposed of in association with the drilling of this well.

13. Lessee's or Operators Representative and Certification:

G. T. Nimmo, Operations Manager, P. O. Box 458, Rock Springs, Wyoming 82902, telephone number (307) 352-7577.

Certification:

I hereby certify that I, or persons under my direct supervision, have inspected the proposed drill site and access route, that I am familiar with the conditions which currently exist, that the statements made in the plan are, to the best of my knowledge, true and correct; and, that the work associated with the operations proposed herein will be performed by Wexpro Company and its contractors and subcontractors in conformity with this plan and the terms and conditions under which it is approved. This statement is subject to the provisions of 18 U.S.C. 1001 for the filing of a false statement.

Please be advised that Wexpro Company is considered to be the operator of Well No. 66; NW ¼, SE ¼, Section 21, Township 3N, Range 24E; Lease SL-045051b, Daggett County; and is responsible under the terms and conditions of the lease for the operations conducted upon the leased lands. Bond coverage is provided by BLM Bond ESB000024, Nationwide Bond No. 965002976

Date:

02/5/08

Name



G. T. Nimmo, Operations Manager

WEXPRO COMPANY
CLAY BASIN UNIT #66
LOCATED IN DAGGETT COUNTY, UTAH
SECTION 21, T3N, R24E, S.L.B.&M.

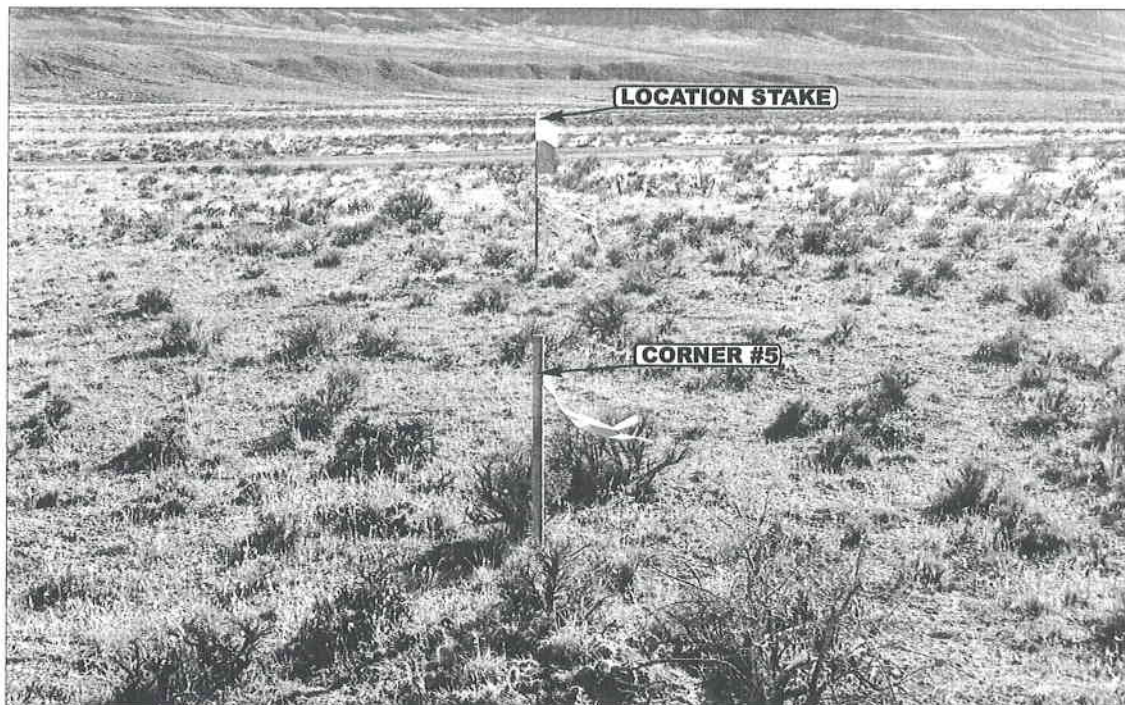


PHOTO: VIEW FROM CORNER #5 TO LOCATION STAKE

CAMERA ANGLE: SOUTHWESTERLY

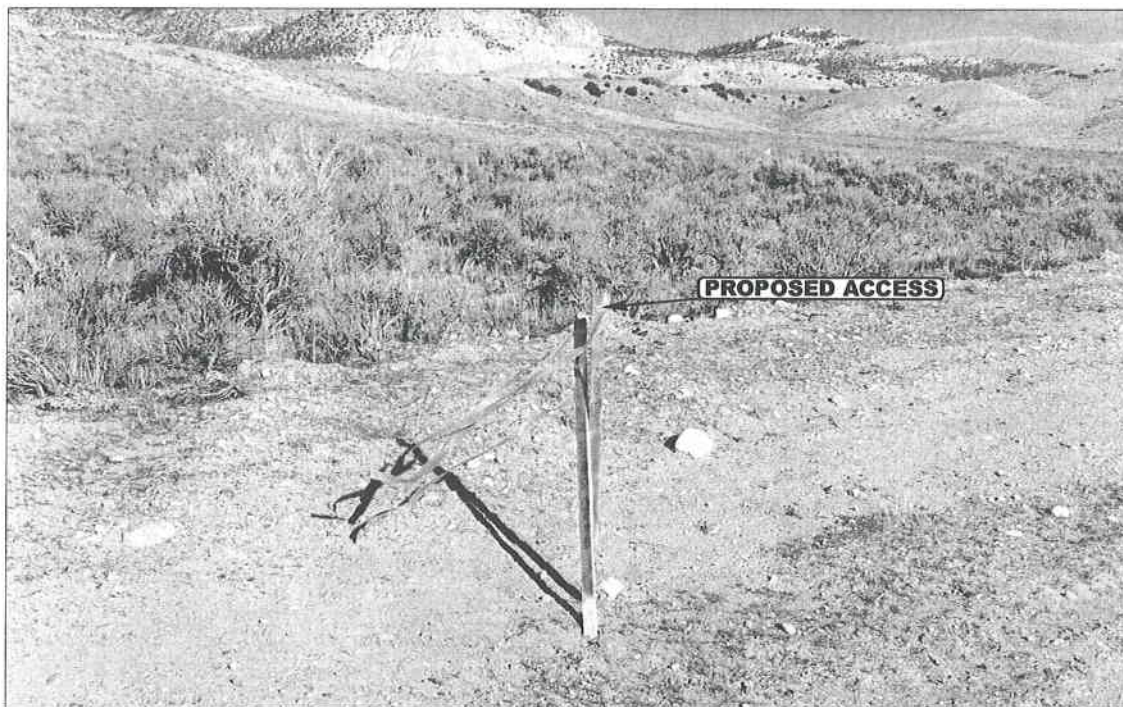


PHOTO: VIEW FROM BEGINNING OF PROPOSED ACCESS

CAMERA ANGLE: NORTHEASTERLY



- Since 1964 -

UELS Uintah Engineering & Land Surveying
85 South 200 East Vernal, Utah 84078
435-789-1017 uels@uelsinc.com

LOCATION PHOTOS

10 **30** **07**
MONTH DAY YEAR

PHOTO

TAKEN BY: T.A.

DRAWN BY: C.P.

REVISED: 00-00-00

WEXPRO COMPANY

LOCATION LAYOUT FOR

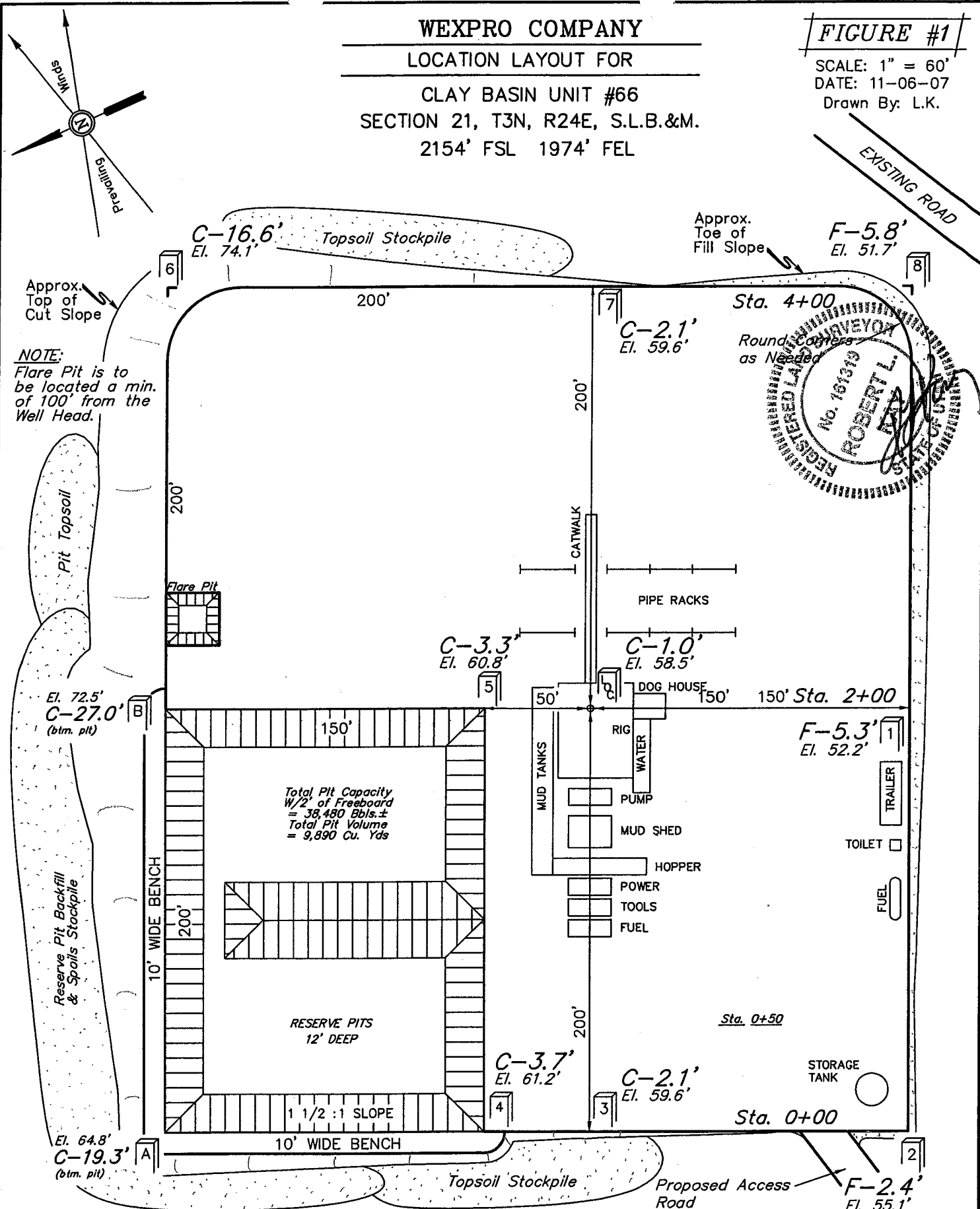
CLAY BASIN UNIT #66
SECTION 21, T3N, R24E, S.L.B.&M.
2154' FSL 1974' FEL

FIGURE #1

SCALE: 1" = 60'

DATE: 11-06-07

Drawn By: L.K.



Elev. Ungraded Ground at Location Stake = 6358.5'

Elev. Graded Ground at Location Stake = 6357.5'

UINTAH ENGINEERING & LAND SURVEYING

85 So. 200 East * Vernal, Utah 84078 * (435) 789-1017

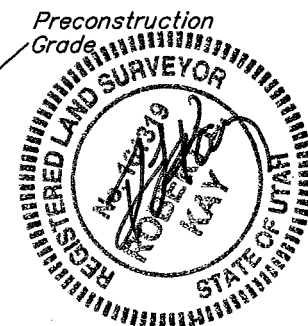
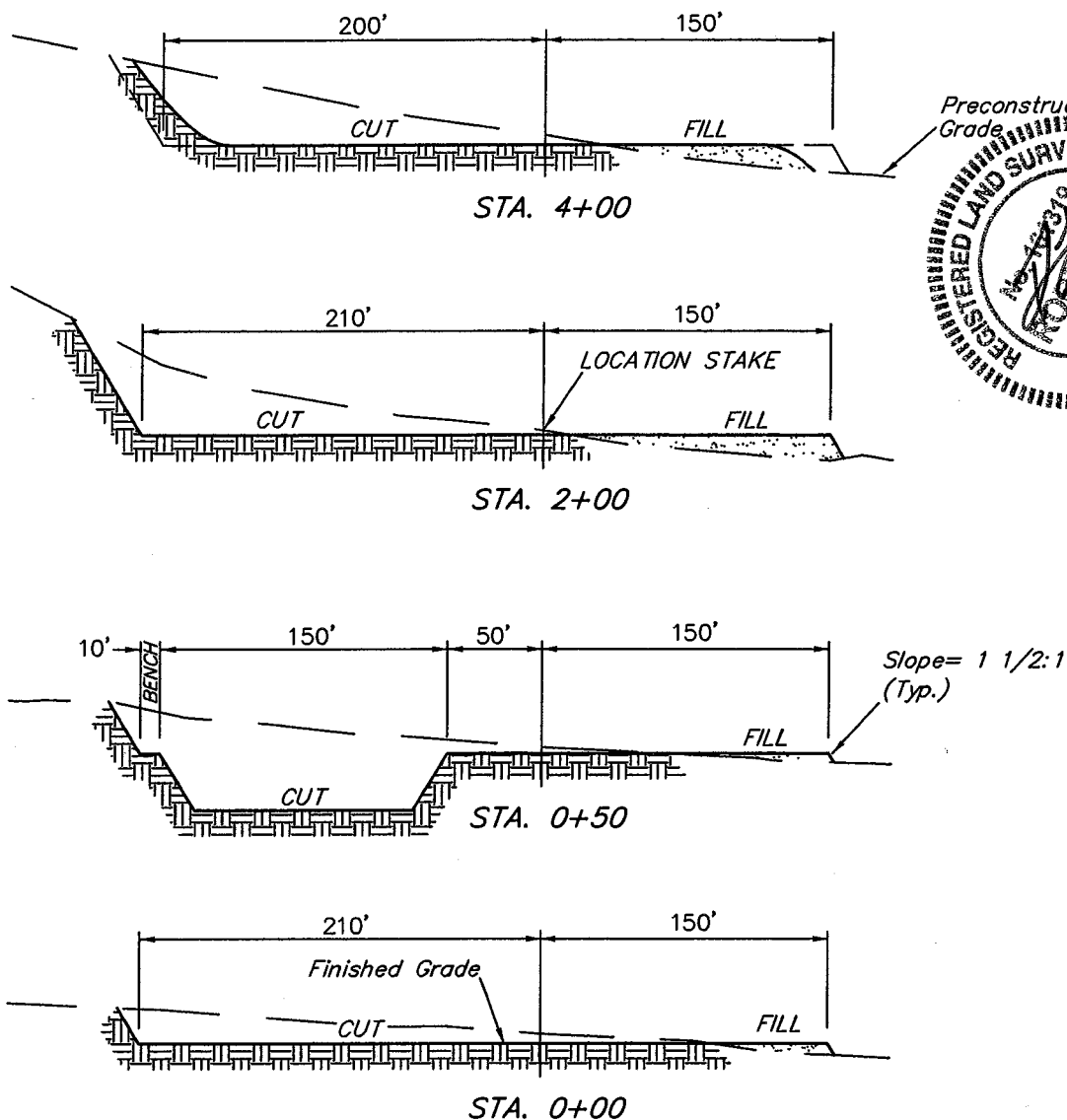
WEXPRO COMPANY

TYPICAL CROSS SECTIONS FOR

CLAY BASIN UNIT #66
SECTION 21, T3N, R24E, S.L.B.&M.
2154' FSL 1974' FEL

FIGURE #2

1" = 40'
X-Section
Scale
1" = 100'
DATE: 11-06-07
Drawn By: L.K.



NOTE:

Topsoil should not be Stripped Below Finished Grade on Substructure Area.

APPROXIMATE ACREAGES

WELL SITE DISTURBANCE = ± 3.727 ACRES
ACCESS ROAD DISTURBANCE = ± 0.090 ACRES
TOTAL = ± 3.817 ACRES

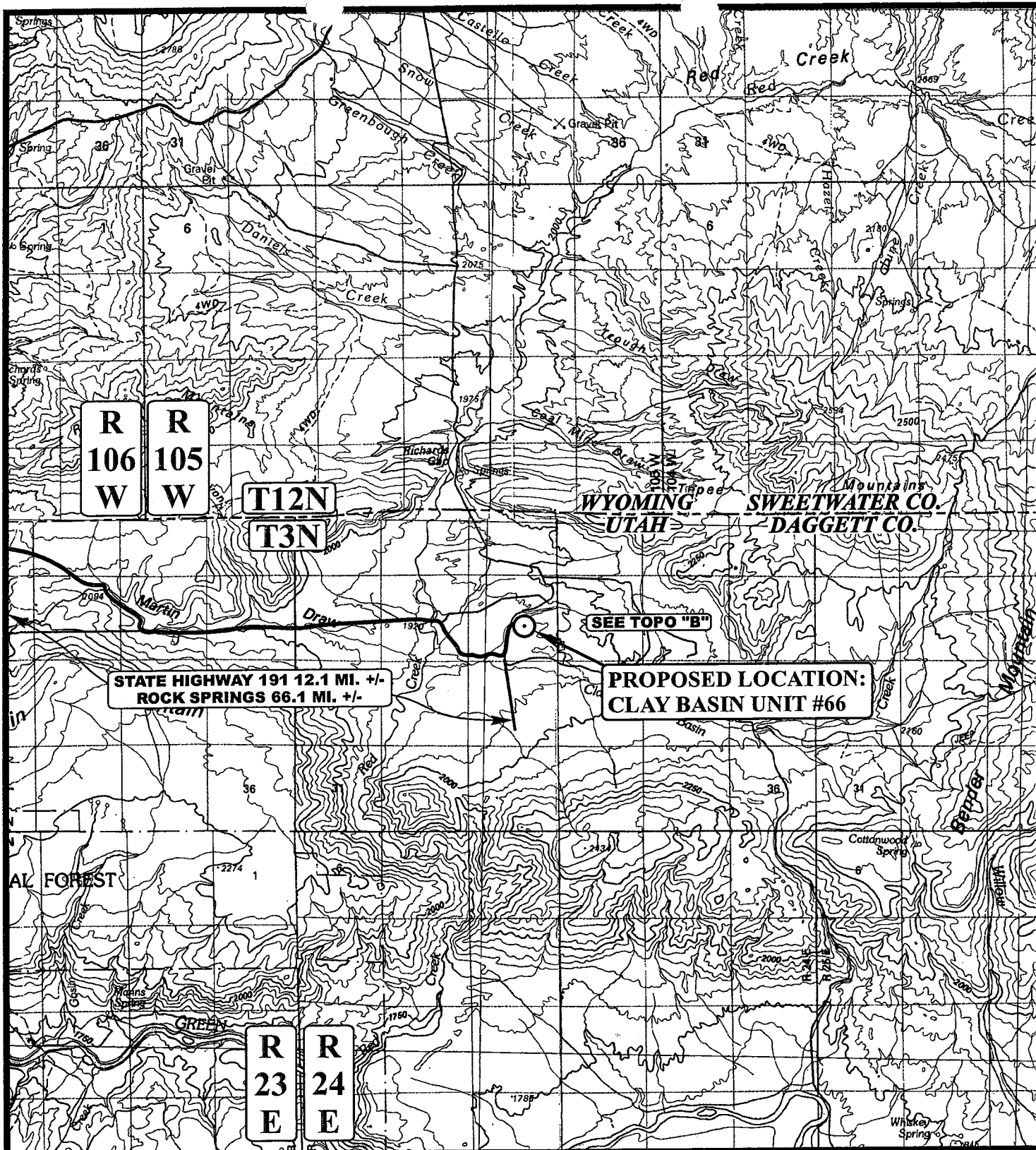
* NOTE:
FILL QUANTITY INCLUDES
5% FOR COMPACTION

APPROXIMATE YARDAGES

(6") Topsoil Stripping = 3,130 Cu. Yds.
Remaining Location = 33,450 Cu. Yds.
TOTAL CUT = 36,580 CU.YDS.
FILL = 6,190 CU.YDS.

EXCESS MATERIAL = 30,390 Cu. Yds.
Topsoil & Pit Backfill = 8,080 Cu. Yds.
(1/2 Pit Vol.)
EXCESS UNBALANCE = 22,310 Cu. Yds.
(After Interim Rehabilitation)

UINTAH ENGINEERING & LAND SURVEYING
85 So. 200 East * Vernal, Utah 84078 * (435) 789-1017



LEGEND:

○ PROPOSED LOCATION



WEXPRO COMPANY

CLAY BASIN UNIT #66
SECTION 21, T3N, R24E, S.L.B.&M.
2154' FSL 1974' FEL



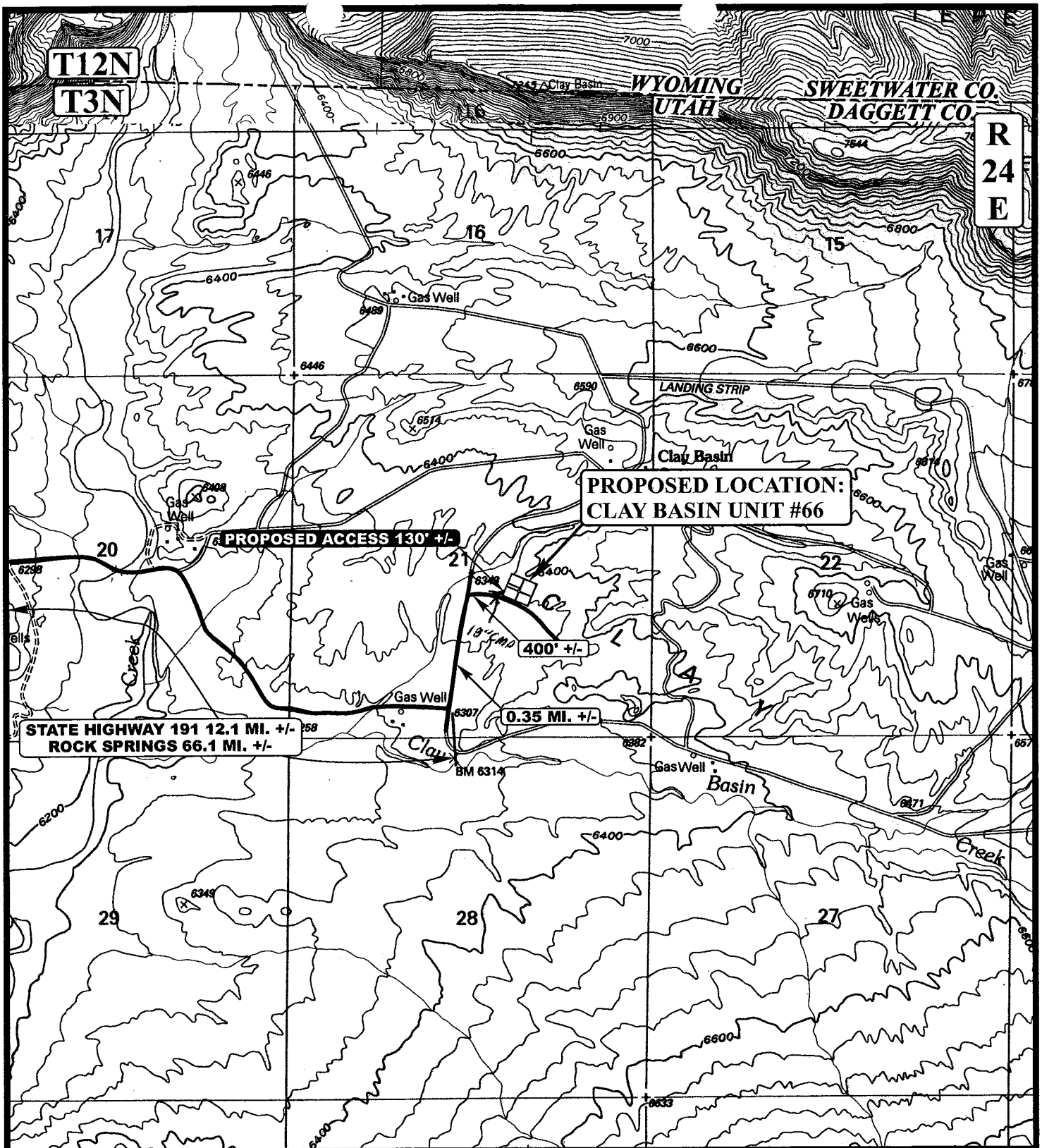
Uintah Engineering & Land Surveying
85 South 200 East Vernal, Utah 84078
(435) 789-1017 * FAX (435) 789-1813

TOPOGRAPHIC
MAP

10 30 07
MONTH DAY YEAR

SCALE: 1:100,000 DRAWN BY: C.P. REVISED: 00-00-00





LEGEND:

— EXISTING ROAD
 - - - PROPOSED ACCESS ROAD
 - 18" CMP



WEXPRO COMPANY

CLAY BASIN UNIT #66
SECTION 21, T3N, R24E, S.L.B.&M.
2154' FSL 1974' FEL



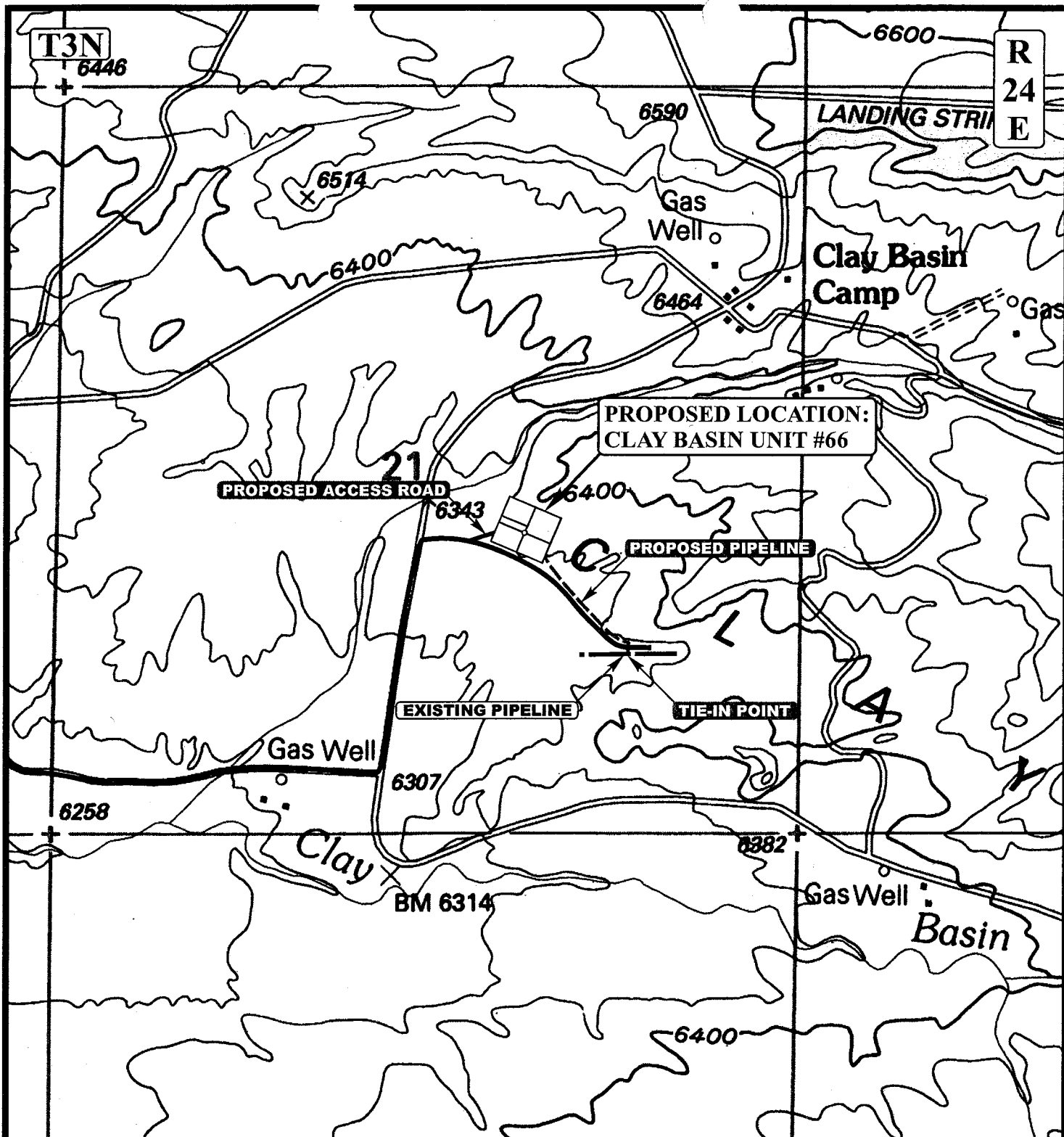
Uintah Engineering & Land Surveying
 85 South 200 East Vernal, Utah 84078
 (435) 789-1017 * FAX (435) 789-1813

TOPOGRAPHIC
MAP

10 **30** **07**
 MONTH DAY YEAR

SCALE: 1" = 2000' DRAWN BY: C.P. REVISED: 00-00-00





APPROXIMATE TOTAL PIPELINE DISTANCE = 955' +/-

LEGEND:

- PROPOSED ACCESS ROAD
- EXISTING PIPELINE
- PROPOSED PIPELINE



WEXPRO COMPANY

CLAY BASIN UNIT #66
SECTION 21, T3N, R24E, S.L.B.&M.
2154' FSL 1974' FEL



Uintah Engineering & Land Surveying
85 South 200 East Vernal, Utah 84078
(435) 789-1017 * FAX (435) 789-1813

| | | | | | |
|-------------------|--|----------------|-------|-------------------|------|
| TOPOGRAPHIC | | | 10 | 30 | 07 |
| MAP | | | MONTH | DAY | YEAR |
| SCALE: 1" = 1000' | | DRAWN BY: C.P. | | REVISED: 00-00-00 | |



UINTAH ENGINEERING & LAND SURVEYING
85 So. 200 East * Vernal, Utah 84078 * (435) 789-1017

WORKSHEET
APPLICATION FOR PERMIT TO DRILL

APD RECEIVED: 02/27/2008

API NO. ASSIGNED: 43-009-30067

WELL NAME: CLAY BASIN U 66

OPERATOR: WEXPRO COMPANY (N1070)

CONTACT: G.T. NIMMO

PHONE NUMBER: 307-382-9791

PROPOSED LOCATION:

NWSE 21 030N 240E

SURFACE: 2154 FSL 1974 FEL

BOTTOM: 2154 FSL 1974 FEL

COUNTY: DAGGETT

LATITUDE: 40.98140 LONGITUDE: -109.2090

UTM SURF EASTINGS: 650673 NORTHINGS: 4538025

FIELD NAME: CLAY BASIN (50)

INSPECT LOCATN BY: / /

| Tech Review | Initials | Date |
|-------------|----------|------|
|-------------|----------|------|

| | | |
|-------------|--|--|
| Engineering | | |
|-------------|--|--|

| | | |
|---------|--|--|
| Geology | | |
|---------|--|--|

| | | |
|---------|--|--|
| Surface | | |
|---------|--|--|

LEASE TYPE: 1 - Federal

LEASE NUMBER: SL 045051B

SURFACE OWNER: 1 - Federal

PROPOSED FORMATION: FRTR

COALBED METHANE WELL? NO

RECEIVED AND/OR REVIEWED:

☒ Plat
☒ Bond: Fed[1] Ind[] Sta[] Fee[]
(No. 965002976)
☒ Potash (Y/N)
☒ Oil Shale 190-5 (B) or 190-3 or 190-13
☒ Water Permit
(No. 41-3640)
☒ RDCC Review (Y/N)
(Date:)
☒ Fee Surf Agreement (Y/N)
☒ Intent to Commingle (Y/N)

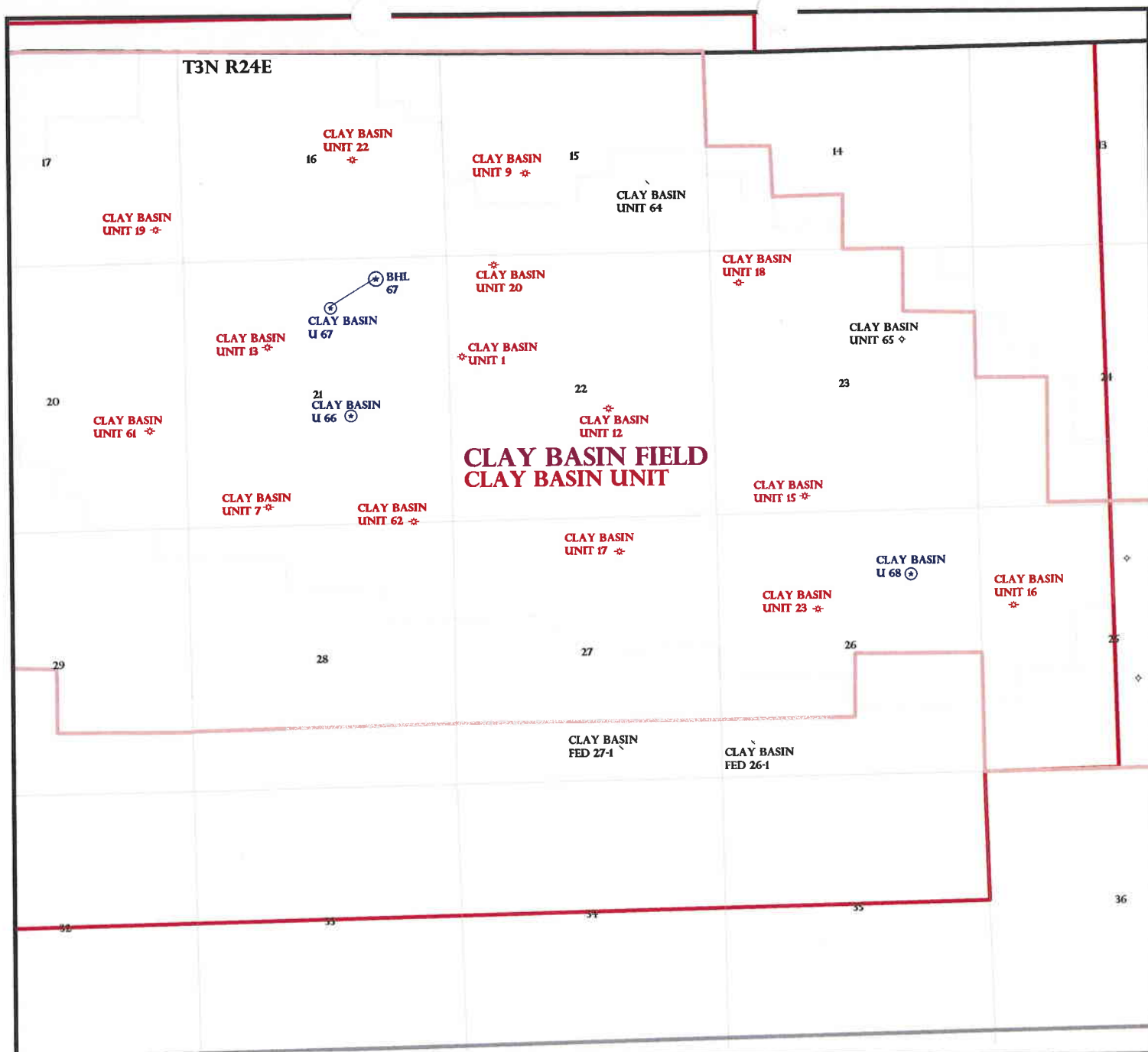
LOCATION AND SITING:

____ R649-2-3.
Unit: CLAY BASIN GAS STORAGE
☒ R649-3-2. General
Siting: 460 From Qtr/Qtr & 920' Between Wells
____ R649-3-3. Exception
____ Drilling Unit
Board Cause No: _____
Eff Date: _____
Siting: _____
____ R649-3-11. Directional Drill

COMMENTS: _____

STIPULATIONS: _____

1. Lease Approval
2. Spacing Strip



OPERATOR: WEXPRO COMPANY (N1070)

SEC: 21 T.3S R. 24E

FIELD: CLAY BASIN (50)

COUNTY: DAGGETT

SPACING: R649-3-2 / GENERAL SITING

Field Status

- ABANDONED
- ACTIVE
- COMBINED
- INACTIVE
- PROPOSED
- STORAGE
- TERMINATED

Unit Status

- EXPLORATORY
- GAS STORAGE
- NF PP OIL
- NF SECONDARY
- PENDING
- PI OIL
- PP GAS
- PP GEOTHERML
- PP OIL
- SECONDARY
- TERMINATED

Wells Status

- GAS INJECTION
- GAS STORAGE
- LOCATION ABANDONED
- NEW LOCATION
- PLUGGED & ABANDONED
- PRODUCING GAS
- PRODUCING OIL
- SHUT-IN GAS
- SHUT-IN OIL
- TEMP. ABANDONED
- TEST WELL
- WATER INJECTION
- WATER SUPPLY
- WATER DISPOSAL
- DRILLING



PREPARED BY: DIANA MASON
DATE: 29-FEBRUARY-2008

United States Department of the Interior

BUREAU OF LAND MANAGEMENT

Utah State Office
P.O. Box 45155
Salt Lake City, Utah 84145-0155

IN REPLY REFER TO:
3160
(UT-922)

March 3, 2008

Memorandum

To: Assistant District Manager Minerals, Vernal District
From: Michael Coulthard, Petroleum Engineer
Subject: 2008 Plan of Development Clay Basin Unit,
Daggett County, Utah and Sweetwater County
Wyoming.

Pursuant to email between Diana Whitney, Division of Oil, Gas and Mining, and Mickey Coulthard, Utah State Office, Bureau of Land Management, the following wells are planned for calendar year 2008 within the Eight Mile Flat Unit, Uintah County, Utah.

(Proposed PZ Frontier)

43-009-30067 Clay Basin U 66 Sec 21 T03N R24E 2154 FSL 1974 FEL
43-009-30066 Clay Basin U 68 Sec 26 T03N R24E 1303 FNL 1338 FEL
43-009-30068 Clay Basin U 67 Sec 21 T03N R24E 1015 FNL 2314 FEL
BHL Sec 21 T03N R24E 0444 FNL 1397 FEL

This office has no objection to permitting the wells at this time.

/s/ Michael L. Coulthard

bcc: File - Clay Basin Unit
Division of Oil Gas and Mining
Central Files
Agr. Sec. Chron
Fluid Chron

MCoulthard:mc:3-3-08



JON M. HUNTSMAN, JR.
Governor

GARY R. HERBERT
Lieutenant Governor

State of Utah

DEPARTMENT OF NATURAL RESOURCES

MICHAEL R. STYLER
Executive Director

Division of Oil, Gas and Mining

JOHN R. BAZA
Division Director

April 9, 2009

Wexpro Company
P O Box 458
Rock Springs, WY 82902

Re: Clay Basin Unit 66 Well, 2154' FSL, 1974' FEL, NW SE, Sec. 21, T. 3 North,
R. 24 East, Daggett County, Utah

Gentlemen:

Pursuant to the provisions and requirements of Utah Code Ann. § 40-6-1 *et seq.*, Utah Administrative Code R649-3-1 *et seq.*, and the attached Conditions of Approval, approval to drill the referenced well is granted.

This approval shall expire one year from the above date unless substantial and continuous operation is underway, or a request for extension is made prior to the expiration date. The API identification number assigned to this well is 43-009-30067.

Sincerely,

Gil Hunt
Associate Director

pab
Enclosures

cc: Daggett County Assessor
Bureau of Land Management, Vernal Office



Operator: Wexpro Company
Well Name & Number Clay Basin Unit 66
API Number: 43-009-30067
Lease: SL 045051B

Location: NW SE Sec. 21 T. 3 North R. 24 East

Conditions of Approval

1. General

Compliance with the requirements of Utah Admin. R. 649-1 *et seq.*, the Oil and Gas Conservation General Rules, and the applicable terms and provisions of the approved Application for permit to drill.

2. Notification Requirements

Notify the division within 24 hours of spudding the well.

- Contact Carol Daniels at (801) 538-5284.

Notify the Division prior to commencing operations to plug and abandon the well.

- Contact Dustin Doucet at (801) 538-5281 (801) 733-0983 home

3. Reporting Requirements

All required reports, forms and submittals will be promptly filed with the Division, including but not limited to the Entity Action Form (Form 6), Report of Water Encountered During Drilling (Form 7), Weekly Progress Reports for drilling and completion operations, and Sundry Notices and Reports on Wells requesting approval of change of plans or other operational actions.

4. State approval of this well does not supersede the required federal approval, which must be obtained prior to drilling.

5. This proposed well is located in an area for which drilling units (well spacing patterns) have not been established through an order of the Board of Oil, Gas and Mining (the "Board"). In order to avoid the possibility of waste or injury to correlative rights, the operator is requested, once the well has been drilled, completed, and has produced, to analyze geological and engineering data generated therefrom, as well as any similar data from surrounding areas if available. As soon as is practicable after completion of its analysis, and if the analysis suggests an area larger than the quarter-quarter section upon which the well is located is being drained, the operator is requested to seek an appropriate order from the Board establishing drilling and spacing units in conformance with such analysis by filing a Request for Agency Action with the Board.

RECEIVED

UDOGM

Form 3160-3
(August, 2007)

FEB 27 2008

FORM APPROVED
OMB NO. 1004-0137
Expires: July 31, 2010UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

APPLICATION FOR PERMIT TO DRILL OR REENTER

1a. Type of Work: ☒ DRILL ☐ REENTER
1b. Type of Well: ☐ Oil Well ☒ Gas Well ☐ Other ☒ Single Zone ☐ Multiple Zone

2. Name of Operator

WEXPRO COMPANY

3a. Address

P.O. BOX 458, ROCK SPRINGS, WY 82902

3b. Phone No. (include area code)

307 382-9791

4. Location of well (Report location clearly and in accordance with any State requirements. *)

At surface

2154' FSL 1974' FEL NW SE Lat. 40.981319 Long. 109.209703

At proposed prod. zone

5. Lease Serial No.

UT SL 045051 b

6. If Indian, Allottee or Tribe Name

n/a

7. If Unit or CA Agreement, Name and No.

CLAY BASIN UNIT UTU063009X

8. Lease Name and Well No.

CLAY BASIN UNIT NO. 66

9. API Well No.

43 009 30067
PENDING

10. Field and Pool, or Exploratory

CLAY BASIN

11. Sec., T., R., M., or Blk. and Survey or Area

21 T 3N R 24E

S.L.B.
&M.

14. Distance in miles and direction from the nearest town or post office*

APPROXIMATELY 7 MILES FROM DUTCH JOHN, UTAH

12. County or Parish

DAGGETT

13. State

UTAH

15. Distance from proposed*

location to nearest

490'

property or lease line, ft.

(Also to nearest drlg. unit line, if any)

16. No. of acres in lease

1,777.42

17. Spacing Unit dedicated to this well

N/A

18. Distance from proposed location*

to nearest well, drilling, completed,

2400'

applied for, on this lease, ft.

19. Proposed Depth

5,530'

20. BLM/ BIA Bond No. on file

Nationwide Bond No. 965002976- ESB0000024

21. Elevations (Show whether DF, RT, GR, etc.)

6359'

ungraded

22. Approximate date work will start*

September 15, 2008

23. Estimated duration

25 days

24. Attachments

The following, completed in accordance with the requirements of Onshore Oil and Gas Order No. 1 shall be attached to this form:

1. Well plat certified by a registered surveyor.

2. A Drilling Plan.

3. A Surface Use Plan (if the location is on National Forest System Land).

SUPO shall be filed with the appropriate Forest Service Office).

4. Bond to cover the operations unless covered by existing bond on file (see item 20 above).

5. Operator certification.

6. Such other site specific information and/ or plans as may be required by authorized officer.

25. Signature

Name (Printed/ Typed)

G. T. NIMMO

Date

02/21/08

Title

OPERATIONS MANAGER

Approved By (Signature)

Name (Printed/ Typed)

JERRY KAVELA

Date

APR 24 2009

Title

Assistant Field Manager
Lands & Mineral Resources

Office

VERNAL FIELD OFFICE

Application approval does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Conditions of approval, if any, are attached.

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1717 make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Continued on page 2)

AFMSS# 08PPD135A

*(Instructions on page 2)

NOTICE OF APPROVAL

CONDITIONS OF APPROVAL ATTACHED

RECEIVED

APR 29 2009

DIV. OF OIL, GAS & MINING



UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
VERNAL FIELD OFFICE

170 South 500 East

VERNAL, UT 84078

(435) 781-4401



CONDITIONS OF APPROVAL FOR APPLICATION FOR PERMIT TO DRILL

Company: Wexpro Company
Well No: Clay Basin Unit #66
API No: 43-009-30067

Location: NWSE, Sec. 21, T3N, R24E
Lease No: UTSL-045051B
Agreement: Clay Basin Unit

| Title | Name | Office Phone Number | Cell Phone Number |
|-----------------------------------|--------------------|---------------------|-------------------|
| Petroleum Engineer | Michael Lee | (435) 781-4432 | (435) 828-7875 |
| Petroleum Engineer | Ryan Angus | (435) 781-4430 | (435) 828-7368 |
| Supervisory Petroleum Technician: | Jamie Sparger | (435) 781-4502 | (435) 828-3913 |
| Supervisory NRS | Karl Wright | (435) 781-4484 | |
| NRS/Enviro Scientist | Christine Cimiluca | (435) 781-4475 | |
| NRS/Enviro Scientist | Dan Emmett | (435) 781-3414 | (435) 828-4029 |
| NRS/Enviro Scientist | Anna Figueroa | (435) 781-3407 | (435) 828-3548 |
| NRS/Enviro Scientist | Lori Ford | (435) 781-4406 | |
| NRS/Enviro Scientist | David Gordon | (435) 781-4424 | |
| NRS/Enviro Scientist | James Hereford | (435) 781-3412 | (435) 828-3546 |
| NRS/Enviro Scientist | Chuck Macdonald | (435) 781-4441 | (435) 828-7481 |
| NRS/Enviro Scientist | Nathan Packer | (435) 781-3405 | (435) 828-3545 |
| NRS/Enviro Scientist | Paul Percival | (435) 781-4493 | (435) 828-7381 |
| NRS/Enviro Scientist | Verlyn Pindell | (435) 781-3402 | (435) 828-3547 |
| NRS/Enviro Scientist | Holly Villa | (435) 781-4404 | (435) 828-3544 |
| | | Fax: (435) 781-3420 | |

**A COPY OF THESE CONDITIONS SHALL BE FURNISHED TO YOUR
FIELD REPRESENTATIVE TO INSURE COMPLIANCE**

All lease and/or unit operations are to be conducted in such a manner that full compliance is made with the applicable laws, regulations (43 CFR Part 3160), and this approved Application for Permit to Drill including Surface and Downhole Conditions of Approval. The operator is considered fully responsible for the actions of his subcontractors. A copy of the approved APD must be on location during construction, drilling, and completion operations. **This permit is approved for a two (2) year period, or until lease expiration, whichever occurs first. An additional extension, up to two (2) years, may be applied for by sundry notice prior to expiration.**

NOTIFICATION REQUIREMENTS

| | | |
|---|---|--|
| Location Construction (Notify Environmental Scientist) | - | Forty-Eight (48) hours prior to construction of location and access roads. |
| Location Completion (Notify Environmental Scientist) | - | Prior to moving on the drilling rig. |
| Spud Notice (Notify Petroleum Engineer) | - | Twenty-Four (24) hours prior to spudding the well. |
| Casing String & Cementing (Notify Supv. Petroleum Tech.) | - | Twenty-Four (24) hours prior to running casing and cementing all casing strings. |
| BOP & Related Equipment Tests (Notify Supv. Petroleum Tech.) | - | Twenty-Four (24) hours prior to initiating pressure tests. |
| First Production Notice (Notify Petroleum Engineer) | - | Within Five (5) business days after new well begins or production resumes after well has been off production for more than ninety (90) days. |

**SURFACE USE PROGRAM
CONDITIONS OF APPROVAL (COAs)**

- All new and replacement internal combustion gas field engines of less than or equal to 300 design-rated horsepower must not emit more than 2 gms of NO_x per horsepower-hour. This requirement does not apply to gas field engines of less than or equal to 40 design-rated horsepower.
- All and replacement internal combustion gas field engines of greater than 300 design rated horsepower must not emit more than 1.0 gms of NO_x per horsepower-hour.
- If there is an active Gilsonite mining operation within 2 miles of the well location, operator shall notify the Gilsonite operator at least 48 hours prior to any blasting during construction.
- If paleontological materials are uncovered during construction, the operator is to immediately stop work and contact the Authorized Officer (AO). A determination will be made by the AO as to what mitigation may be necessary for the discovered paleontologic material before construction can continue.

SITE SPECIFIC COAs:

1. **Time Limitations:** (Only during construction & drilling)

Lands in this lease have been identified as habitat for some wildlife. Therefore, modifications to the Surface Use Plan of Operations will be required in order to protect this wildlife habitat from surface disturbing activities (see below).

TIME RESTRICTION

REASON

| | |
|----------------------------|----------------------------------|
| December 1 - April 30..... | Crucial mule deer winter habitat |
| March 1 - June 30..... | Sage grouse lek/nesting habitat |

There will be no construction, drilling or fracing operations during the above time periods.

2. **Special Status Plants:** If Uinta Basin hookless cactus or other special status plants are found, construction will cease and the AO will be notified to determine the appropriate mitigation.
3. Operator will minimize potential impacts to migratory birds by implementing the following mitigative measures:
 - a) Screen stacks to heater-treater units to prevent bird entry.
 - b) Close waste pits as soon as possible (within 90 days is optimum)
 - c) Remove trees and shrubs outside of nesting season (March 1 – July 31) if possible.
4. **Diversion of water from Red Creek tributary:** If water is pulled from Red Creek for drilling, construction etc., no materials will be added to or moved in or from the stream channel. If materials are moved in the stream channel, a Core of Engineers 404 permit or a State of Utah Stream Channel Alteration permit will be required.

5. **Surface Pipelines:** Restrictions for placement of surface pipelines:-

- a): Surface pipelines will be placed 5-10 feet outside of the borrow area.
- b): Surface pipelines will be placed in such a way that they will not wander into the borrow area.
- c): Pipelines will be buried at all major road and drainage crossings.

6. **Specific Conditions Pertaining to Location Construction:**

- Ditch around the well pad & channel flow away from the location.

7. **Reserve pit:** Any pits, and open tanks shall be fenced in order to exclude livestock and other wildlife from the area. The reserve pit will be closed within 90 days (weather permitting).

8. Paint all facilities covert green within six months of installation, except those facilities which are required to comply with the Occupational Safety and Health Act (OSHA).

9. **Invasive/Noxiuos Weeds** The operator will be responsible for treatment and control of invasive and noxious weeds.

Prior to any treatment on BLM administered lands, a Pesticide Use Proposal will be submitted to the Vernal Field Office for approval.

10. **Interim Reclamation:**

All portions of the well pads and ROWS not utilized for the operation phase of the project will be re-seeded. Post construction seeding applications will continue until determined successful by the BLM.

- During interim reclamation of the surface, the following seed mixture will be used PLS (Pure Live Seed) formula.

| | |
|---|--------------|
| shadscale (<i>Atriplex confertifolia</i>)..... | 3 lbs/acre |
| Gardner saltbush (<i>Atriplex gardneri</i>)..... | 3 lbs/acre |
| needle & thread grass (<i>Hesperostipa comata</i>)..... | 3 lbs/acre |
| Wyoming big sage (<i>Artemisia tridentata</i>)..... | 0.5 lbs/acre |

Rates are set for drill seeding; double the rate if broadcasting.

- Reseeding may be required if initial seeding is not successful.

11. **Final Reclamation:**

- Once the location has been plugged and abandoned, final reclamation will be done.

**DOWNHOLE PROGRAM
CONDITIONS OF APPROVAL (COAs)**

SITE SPECIFIC DOWNHOLE COAs:

- Logging: Run Gamma Ray from TD to surface.

All provisions outlined in Onshore Oil & Gas Order #2 Drilling Operations shall be strictly adhered to. The following items are emphasized:

DRILLING/COMPLETION/PRODUCING OPERATING STANDARDS

- The spud date and time shall be reported orally to Vernal Field Office within 24 hours of spudding.
- Notify Vernal Field Office Supervisory Petroleum Engineering Technician at least 24 hours in advance of casing cementing operations and BOPE & casing pressure tests.
- All requirements listed in Onshore Order #2 III. E. Special Drilling Operations are applicable for air drilling of surface hole.
- Blowout prevention equipment (BOPE) shall remain in use until the well is completed or abandoned. Closing unit controls shall remain unobstructed and readily accessible at all times. Choke manifolds shall be located outside of the rig substructure.
- All BOPE components shall be inspected daily and those inspections shall be recorded in the daily drilling report. Components shall be operated and tested as required by Onshore Oil & Gas Order No. 2 to insure good mechanical working order. All BOPE pressure tests shall be performed by a test pump with a chart recorder and **NOT** by the rig pumps. Test shall be reported in the driller's log.
- BOP drills shall be initially conducted by each drilling crew within 24 hours of drilling out from under the surface casing and weekly thereafter as specified in Onshore Oil & Gas Order No. 2.
- Casing pressure tests are required before drilling out from under all casing strings set and cemented in place.
- No aggressive/fresh hard-banded drill pipe shall be used within casing.
- **Cement baskets shall not be run on surface casing.**
- The operator must report all shows of water or water-bearing sands to the BLM. If flowing water is encountered it must be sampled, analyzed, and a copy of the analyses submitted to the BLM Vernal Field Office.
- The operator must report encounters of all non oil & gas mineral resources (such as Gilsonite, tar sands, oil shale, trona, etc.) to the Vernal Field Office, in writing, within 5 working days of each

encounter. Each report shall include the well name/number, well location, date and depth (from KB or GL) of encounter, vertical footage of the encounter and, the name of the person making the report (along with a telephone number) should the BLM need to obtain additional information.

- A complete set of angular deviation and directional surveys of a directional well will be submitted to the Vernal BLM office engineer within 30 days of the completion of the well.
- While actively drilling, chronologic drilling progress reports shall be filed directly with the BLM, Vernal Field Office on a weekly basis in sundry, letter format or e-mail to the Petroleum Engineers until the well is completed.
- A cement bond log (CBL) will be run from the production casing shoe to the top of cement and shall be utilized to determine the bond quality for the production casing. Submit a field copy of the CBL to this office.
- **Please submit an electronic copy of all other logs run on this well in LAS format to UT_VN_Welllogs@BLM.gov. This submission will supersede the requirement for submittal of paper logs to the BLM.**
- There shall be no deviation from the proposed drilling, completion, and/or workover program as approved. Safe drilling and operating practices must be observed. Any changes in operation must have prior approval from the BLM Vernal Field Office.

OPERATING REQUIREMENT REMINDERS:

- All wells, whether drilling, producing, suspended, or abandoned, shall be identified in accordance with 43 CFR 3162.6. There shall be a sign or marker with the name of the operator, lease serial number, well number, and surveyed description of the well.
- In accordance with 43 CFR 3162.4-3, this well shall be reported on the "Monthly Report of Operations" (Oil and Gas Operations Report ((OGOR)) starting with the month in which operations commence and continue each month until the well is physically plugged and abandoned. This report shall be filed in duplicate, directly with the Minerals Management Service, P.O. Box 17110, Denver, Colorado 80217-0110, or call 1-800-525-7922 (303) 231-3650 for reporting information.
- Should the well be successfully completed for production, the BLM Vernal Field office must be notified when it is placed in a producing status. Such notification will be by written communication and must be received in this office by not later than the fifth business day following the date on which the well is placed on production. The notification shall provide, as a minimum, the following informational items:
 - Operator name, address, and telephone number.
 - Well name and number.
 - Well location ($\frac{1}{4}$ Sec., Twn, Rng, and P.M.).
 - Date well was placed in a producing status (date of first production for which royalty will be paid).
 - The nature of the well's production, (i.e., crude oil, or crude oil and casing head gas, or natural gas and entrained liquid hydrocarbons).
 - The Federal or Indian lease prefix and number on which the well is located; otherwise the non-Federal or non-Indian land category, i.e., State or private.
 - Unit agreement and/or participating area name and number, if applicable.
 - Communitization agreement number, if applicable.
- Any venting or flaring of gas shall be done in accordance with Notice to Lessees (NTL) 4A and needs prior approval from the BLM Vernal Field Office.
- All undesirable events (fires, accidents, blowouts, spills, discharges) as specified in NTL 3A will be reported to the BLM, Vernal Field Office. Major events, as defined in NTL3A, shall be reported verbally within 24 hours, followed by a written report within 15 days. "Other than Major Events" will be reported in writing within 15 days. "Minor Events" will be reported on the Monthly Report of Operations and Production.

- Whether the well is completed as a dry hole or as a producer, "Well Completion and Recompletion Report and Log" (BLM Form 3160-4) shall be submitted not later than 30 days after completion of the well or after completion of operations being performed, in accordance with 43 CFR 3162.4-1. Two copies of all logs run, core descriptions, and all other surveys or data obtained and compiled during the drilling, workover, and/or completion operations, shall be filed on BLM Form 3160-4. Submit with the well completion report a geologic report including, at a minimum, formation tops, and a summary and conclusions. Also include deviation surveys, sample descriptions, strip logs, core data, drill stem test data, and results of production tests if performed. Samples (cuttings, fluid, and/or gas) shall be submitted only when requested by the BLM, Vernal Field Office.
- All off-lease storage, off-lease measurement, or commingling on-lease or off-lease, shall have prior written approval from the BLM Vernal Field Office.
- Oil and gas meters shall be calibrated in place prior to any deliveries. The BLM Vernal Field Office Petroleum Engineers will be provided with a date and time for the initial meter calibration and all future meter proving schedules. A copy of the meter calibration reports shall be submitted to the BLM Vernal Field Office. All measurement facilities will conform to the API standards for liquid hydrocarbons and the AGA standards for natural gas measurement. All measurement points shall be identified as the point of sale or allocation for royalty purposes.
- A schematic facilities diagram as required by Onshore Oil & Gas Order No. 3 shall be submitted to the BLM Vernal Field Office within 30 days of installation or first production, whichever occurs first. All site security regulations as specified in Onshore Oil & Gas Order No. 3 shall be adhered to. All product lines entering and leaving hydrocarbon storage tanks will be effectively sealed in accordance with Onshore Oil & Gas Order No. 3.
- Any additional construction, reconstruction, or alterations of facilities, including roads, gathering lines, batteries, etc., which will result in the disturbance of new ground, shall require the filing of a suitable plan and need prior approval of the BLM Vernal Field Office. Emergency approval may be obtained orally, but such approval does not waive the written report requirement.
- No location shall be constructed or moved, no well shall be plugged, and no drilling or workover equipment shall be removed from a well to be placed in a suspended status without prior approval of the BLM Vernal Field Office. If operations are to be suspended for more than 30 days, prior approval of the BLM Vernal Field Office shall be obtained and notification given before resumption of operations.
- Pursuant to Onshore Oil & Gas Order No. 7, this is authorization for pit disposal of water produced from this well for a period of 90 days from the date of initial production. A permanent disposal method must be approved by this office and in operation prior to the end of this 90-day period. In order to meet this deadline, an application for the proposed permanent disposal method shall be submitted along with any necessary water analyses, as soon as possible, but no later than 45 days after the date of first production. Any method of disposal which has not been approved prior to the end of the authorized 90-day period will be considered as an Incident of Noncompliance and will be grounds for issuing a shut-in order until an acceptable manner for disposing of said water is provided and approved by this office.

- Unless the plugging is to take place immediately upon receipt of oral approval, the Field Office Petroleum Engineers must be notified at least 24 hours in advance of the plugging of the well, in order that a representative may witness plugging operations. If a well is suspended or abandoned, all pits must be fenced immediately until they are backfilled. The "Subsequent Report of Abandonment" (Form BLM 3160-5) must be submitted within 30 days after the actual plugging of the well bore, showing location of plugs, amount of cement in each, and amount of casing left in hole, and the current status of the surface restoration.

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004- 0137
Expires: July 31, 2010

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

SUBMIT IN TRIPLICATE - Other Instructions on reverse side.

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

WEXPRO COMPANY

3a. Address

P.O. BOX 458 ROCK SPRINGS, WY 82902

3b. Phone No. (include area code)

(307) 922-5647

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

SHL 2154' FSL 1974' FEL NW SE 21 T 3N R 24E

BHL Same as Above

5. Lease Serial No.

UTSL045051B

6. If Indian, Allottee, or Tribe Name

N/A

7. If Unit or CA. Agreement Name and/or No.

Clay Basin Unit

8. Well Name and No.

Clay Basin Unit No. 66

9. API Well No.

43-009-30067

10. Field and Pool, or Exploratory Area

Clay Basin

11. County or Parish, State

Daggett, Utah

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | | |
|--|---|---|--|---|
| <input checked="" type="checkbox"/> Notice of Intent | <input type="checkbox"/> Acidize | <input type="checkbox"/> Deepen | <input type="checkbox"/> Production (Start/ Resume) | <input type="checkbox"/> Water Shut-off |
| <input type="checkbox"/> Subsequent Report | <input type="checkbox"/> Altering Casing | <input type="checkbox"/> Fracture Treat | <input type="checkbox"/> Reclamation | <input type="checkbox"/> Well Integrity |
| <input type="checkbox"/> Final Abandonment Notice | <input type="checkbox"/> Casing Repair | <input type="checkbox"/> New Construction | <input type="checkbox"/> Recomplete | <input type="checkbox"/> Other _____ |
| | <input type="checkbox"/> Change Plans | <input type="checkbox"/> Plug and abandon | <input type="checkbox"/> Temporarily Abandon | |
| | <input type="checkbox"/> Convert to Injection | <input type="checkbox"/> Plug back | <input checked="" type="checkbox"/> Water Disposal | |

2 Describe Proposed or Completed Operation (clearly state all pertinent details including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths or pertinent markers and sands. Attach the Bond under which the work will performed or provide the Bond No. on file with the BLM/ BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notice shall be filed only after all requirements, including reclamantion, have been completed, and the operator has determined that the site is ready for final inspection.)

Water produced from the above well will be disposed of in a water / blow down tank as previously approved.

Excess water production will be hauled to the following State of Utah approved disposal sites:

R N Industries Inc Sec. 4-2S-2W - Bluebell
LaPoint Recycle & Storage Sec. 12-5S-19E - LaPoint
Dalbo, Inc Sec. 02-6S-20E - Vernal

**Accepted by the
Utah Division of
Oil, Gas and Mining
FOR RECORD ONLY**

All excess produced water will be hauled by tank truck over Unit, Tribal, County and State roads.

Electronically Submitted on WIS 5/5/09

14. I hereby certify that the foregoing is true and correct.

Name (Printed/ Typed)

G.T. Nimmo

Title

Operations Manager

Signature

Date

May 5, 2009

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

Conditions of approval, if any are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office

Title 18 U.S.C. Section 1001 AND Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on page 2)

RECEIVED

MAY 07 2009

DIV. OF OIL, GAS & MINING

DIVISION OF OIL, GAS AND MINING

SPUDDING INFORMATION

Name of Company: WEXPRO COMPANY

Well Name: CLAY BASIN U 66

Api No: 43-009-30067 Lease Type: FEDERAL

Section 21 Township 03N Range 24E County DAGGETT

Drilling Contractor WHITE MOUNTAIN DRLG RIG #

SPUDDED:

Date 06/09/09

Time NOON

How DRY

Drilling will Commence:

Reported by J. R. ELLIS

Telephone # (307) 259-9866

Date 06/09/09 Signed CHD

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS AND MINING

FORM 9

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.

| | | |
|--|--|---|
| 1. TYPE OF WELL OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER _____ | | 5. LEASE DESIGNATION AND SERIAL NUMBER: UTSL 045051B |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: NA |
| 3. ADDRESS OF OPERATOR: CITY ROCK SPRINGS STATE WY ZIP 82902 | | 7. UNIT or CA AGREEMENT NAME: UTU063009X |
| PHONE NUMBER: (307) 922-5600 | | 8. WELL NAME and NUMBER: CLAY BASIN #66 |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154' FSL, 1974' FEL, LAT.: 40.981319, LONG.: 109.209703 QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: NWSE 21 T3N R24 E | | 9. API NUMBER: 4300930067 |
| COUNTY: DAGGETT | | 10. FIELD AND POOL, OR WILDCAT: CLAY BASIN |
| STATE: UTAH | | |

| 11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA | | | |
|--|---|---|--|
| TYPE OF SUBMISSION | TYPE OF ACTION | | |
| <input type="checkbox"/> NOTICE OF INTENT (Submit in Duplicate) Approximate date work will start: _____ | <input type="checkbox"/> ACIDIZE | <input type="checkbox"/> DEEPEN | <input type="checkbox"/> REPERFORATE CURRENT FORMATION |
| | <input type="checkbox"/> ALTER CASING | <input type="checkbox"/> FRACTURE TREAT | <input type="checkbox"/> SIDETRACK TO REPAIR WELL |
| | <input type="checkbox"/> CASING REPAIR | <input type="checkbox"/> NEW CONSTRUCTION | <input type="checkbox"/> TEMPORARILY ABANDON |
| | <input type="checkbox"/> CHANGE TO PREVIOUS PLANS | <input type="checkbox"/> OPERATOR CHANGE | <input type="checkbox"/> TUBING REPAIR |
| | <input type="checkbox"/> CHANGE TUBING | <input type="checkbox"/> PLUG AND ABANDON | <input type="checkbox"/> VENT OR FLARE |
| <input checked="" type="checkbox"/> SUBSEQUENT REPORT (Submit Original Form Only) Date of work completion: 6/9/2009 | <input type="checkbox"/> CHANGE WELL NAME | <input type="checkbox"/> PLUG BACK | <input type="checkbox"/> WATER DISPOSAL |
| | <input type="checkbox"/> CHANGE WELL STATUS | <input type="checkbox"/> PRODUCTION (START/RESUME) | <input type="checkbox"/> WATER SHUT-OFF |
| | <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS | <input type="checkbox"/> RECLAMATION OF WELL SITE | <input checked="" type="checkbox"/> OTHER: SPUD |
| | <input type="checkbox"/> CONVERT WELL TYPE | <input type="checkbox"/> RECOMPLETE - DIFFERENT FORMATION | |

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

SPUD Conductor @ 13:00, 6/9/09.
Drilled 60' of hole.
Ran 60' of 20" Conductor.

| | |
|---------------------------------------|--------------------------------|
| NAME (PLEASE PRINT) <u>W.T. Davey</u> | TITLE <u>Drilling Engineer</u> |
| SIGNATURE <u>W.T. Davey Jr.</u> | DATE <u>6/10/2009</u> |

(This space for State use only)

RECEIVED
JUN 16 2009

DIV. OF OIL, GAS & MINING

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires: July 31, 2010

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

SUBMIT IN TRIPLICATE - Other Instructions on reverse side.

1. Type of Well

☐ Oil Well

☒ Gas Well

☐ Other

2. Name of Operator

WEXPRO COMPANY

3a. Address

P.O. BOX 458 ROCK SPRINGS, WY 82902

3b. Phone No. (include area code)

(307) 922-5647

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

SHL 2154' FSL 1974' FEL NW SE 21 T 3N R 24E
BHL Same as Above

5. Lease Serial No.

UTSL045051B

6. If Indian, Allottee, or Tribe Name

N/A

7. If Unit or C.A. Agreement Name and/or No.

Clay Basin Unit UTU63009B

8. Well Name and No.

Clay Basin Unit No. 66

9. API Well No.

43-009-30067

10. Field and Pool, or Exploratory Area

Clay Basin

11. County or Parish, State

Daggett, Utah

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

TYPE OF ACTION

☐ Notice of Intent

☐ Acidize

☐ Deepen

☐ Production (Start/ Resume)

☐ Water Shut-off

☒ Subsequent Report

☐ Altering Casing

☐ Fracture Treat

☐ Reclamation

☐ Well Integrity

☐ Casing Repair

☐ New Construction

☐ Recomplete

☒ Other

☐ Change Plans

☐ Plug and abandon

☐ Temporarily Abandon

SPUD

☐ Final Abandonment Notice

☐ Convert to Injection

☐ Plug back

☐ Water Disposal

2 Describe Proposed or Completed Operation (clearly state all pertinent details including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths or pertinent markers and sands. Attach the Bond under which the work will performed or provide the Bond No. on file with the BLM/ BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notice shall be filed only after all requirements, including reclamatment, have been completed, and the operator has determined that the site is ready for final inspection.)

Set 60' of 20" Conductor on 6/9/09, at 1300 hours.

The above well was SPUD on 6/10/09 at 1200 hours, and surface casing was set at 440' in 12 1/4" hole.

Please see attached cement report.

RECEIVED

JUN 22 2009

DIV. OF OIL, GAS & MINING

14. I hereby certify that the foregoing is true and correct.

Name (Printed/ Typed)

W.T. Davey

Title

Drilling Engineer

Signature

Date

June 16, 2009

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

Conditions of approval, if any are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office

Title 18 U.S.C. Section 1001 AND Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on page 2)

HALLIBURTON

WEXPRO COMPANY E-BILL

**Clay Basin Unit 66
CLAY BASIN
Daggett County , Utah**

Cement Surface Casing
11-Jun-2009

Post Job Report

Cementing Job Summary

| | | | | | | | | | | | | | | | | |
|--|------|--------------------------|-------------------|---|------------------------|-------------------|-----------------|--------------------------------|-----------------|-------------------|-----------------|------------------------|---------------|--|------|---|
| Sold To #: 343491 | | | | Ship To #: 2093548 | | | | Quote #: | | | | Sales Order #: 6718222 | | | | |
| Customer: WEXPRO COMPANY E-BILL | | | | | | | | Customer Rep: Airdrill, Wexpro | | | | | | | | |
| Well Name: Clay Basin Unit | | | | Well #: 66 | | | | API/UWI #: 43-009-30067 | | | | | | | | |
| Field: CLAY BASIN | | City (SAP): ROCK SPRINGS | | | County/Parish: Daggett | | | | State: Utah | | | | | | | |
| Contractor: Questar | | | | Rig/Platform Name/Num: White Mtn Air Drill750 | | | | | | | | | | | | |
| Job Purpose: Cement Surface Casing | | | | | | | | | | | | | | | | |
| Well Type: Development Well | | | | Job Type: Cement Surface Casing | | | | | | | | | | | | |
| Sales Person: VOLNER, THOMAS | | | | Srcv Supervisor: HORTON, ROBERT | | | | MBU ID Emp #: 335512 | | | | | | | | |
| Job Personnel | | | | | | | | | | | | | | | | |
| HES Emp Name | | Exp Hrs | Emp # | HES Emp Name | | Exp Hrs | Emp # | HES Emp Name | | Exp Hrs | Emp # | | | | | |
| ACUNA, ROGER Lee | | 16 | 445546 | BATRES, JORGE A | | 16 | 441757 | CORDOBA, BENIGNO | | 16 | 440102 | | | | | |
| HORTON, ROBERT C | | 16 | 335512 | LASSILA, AARON K. | | 16 | 380417 | | | | | | | | | |
| Equipment | | | | | | | | | | | | | | | | |
| HES Unit # | | Distance-1 way | | HES Unit # | | Distance-1 way | | HES Unit # | | Distance-1 way | | | | | | |
| | | | | | | | | | | | | | | | | |
| Job Hours | | | | | | | | | | | | | | | | |
| Date | | On Location Hours | Operating Hours | Date | | On Location Hours | Operating Hours | Date | | On Location Hours | Operating Hours | | | | | |
| 6/11/2009 | | 16 | 2 | | | | | | | | | | | | | |
| TOTAL | | | | Total is the sum of each column separately | | | | | | | | | | | | |
| Job | | | | | | Job Times | | | | | | | | | | |
| Formation Name | | | | | | | | Date | Time | Time Zone | | | | | | |
| Formation Depth (MD) | | Top | | | Bottom | | | Called Out | 10 - Jun - 2009 | 16:30 | MST | | | | | |
| Form Type | | | | BHST | | | | On Location | 11 - Jun - 2009 | 02:00 | MST | | | | | |
| Job depth MD | | 536. ft | | Job Depth TVD | | 536. ft | | Job Started | 11 - Jun - 2009 | 15:16 | MST | | | | | |
| Water Depth | | | | Wk Ht Above Floor | | 4. ft | | Job Completed | 11 - Jun - 2009 | 17:19 | MST | | | | | |
| Perforation Depth (MD) | | From | | | To | | | Departed Loc | 11 - Jun - 2009 | 18:00 | MST | | | | | |
| Well Data | | | | | | | | | | | | | | | | |
| Description | | New / Used | Max pressure psig | Size in | ID in | Weight lbm/ft | Thread | | Grade | Top MD ft | Bottom MD ft | Top TVD ft | Bottom TVD ft | | | |
| Surface Open Hole | | | | | 14.75 | | | | | 0 | 536 | | | | | |
| Surface Casing | | New | | 10.75 | 10.05 | 40.5 | | | J-55 | 0 | 536. | | | | | |
| Sales/Rental/3 rd Party (HES) | | | | | | | | | | | | | | | | |
| Description | | | | | | | | Qty | Qty uom | Depth | Supplier | | | | | |
| RHODAMINE RED LIQ DYE (2) | | | | | | | | 2 | LB | | | | | | | |
| LGC-36 UC | | | | | | | | 10 | GAL | | | | | | | |
| Tools and Accessories | | | | | | | | | | | | | | | | |
| Type | Size | Qty | Make | Depth | Type | Size | Qty | Make | Depth | Type | Size | Qty | Make | | | |
| Guide Shoe | | | | | Packer | | | | | Top Plug | 10 3/4 | 1 | | | | |
| Float Shoe | | | | | Bridge Plug | | | | | Bottom Plug | | | | | | |
| Float Collar | | | | | Retainer | | | | | SSR plug set | | | | | | |
| Insert Float | | | | | | | | | | Plug Container | | | | | | |
| Stage Tool | | | | | | | | | | Centralizers | | | | | | |
| Miscellaneous Materials | | | | | | | | | | | | | | | | |
| Gelling Agt | | | Conc | | Surfactant | | | Conc | | Acid Type | | | Qty | | Conc | % |
| Treatment Fld | | | Conc | | Inhibitor | | | Conc | | Sand Type | | | Size | | Qty | |

JUN 22 2009

DIV. OF OIL, GAS & MINING

HALLIBURTON

Cementing Job Summary

| Fluid Data | | | | | | | | | |
|--|--------------|------------------|--------|-----------------------------------|------------------------|---------------------------|------------------|--------------|------------------------|
| Stage/Plug #: 1 | | | | | | | | | |
| Fluid # | Stage Type | Fluid Name | Qty | Qty uom | Mixing Density lbm/gal | Yield ft ³ /sk | Mix Fluid Gal/sk | Rate bbl/min | Total Mix Fluid Gal/sk |
| 1 | Spacer | Gel Water | 20 | bbl | . | .0 | .0 | .0 | |
| 2 | HalCem | HALCEM RS4 | 265 | sacks | 15.2 | 1.27 | 5.80 | | 5.80 |
| 2 % | | CALCIUM CHLORIDE | | | | | | | |
| 0.125 lbm | | POLY-E-FLAKE | | | | | | | |
| 0.25 lbm | | KWIK SEAL | | | | | | | |
| 3 | Displacement | Water | 38.5 | bbl | . | .0 | .0 | .0 | |
| Calculated Values | | Pressures | | Volumes | | | | | |
| Displacement | | Shut In: Instant | | Lost Returns | 15 | Cement Slurry | 59.9 | Pad | |
| Top Of Cement | | 5 Min | | Cement Returns | 12 | Actual Displacement | 38.5 | Treatment | |
| Frac Gradient | | 15 Min | | Spacers | 20 | Load and Breakdown | | Total Job | 118.7 |
| Rates | | | | | | | | | |
| Circulating | | Mixing | | Displacement | | Avg. Job | | | |
| Cement Left In Pipe | Amount | 38.4 ft | Reason | Shoe Joint | | | | | |
| Frac Ring # 1 @ | ID | Frac ring # 2 @ | ID | Frac Ring # 3 @ | ID | Frac Ring # 4 @ | ID | | |
| The Information Stated Herein Is Correct | | | | Customer Representative Signature | | | | | |

HALLIBURTON

Cementing Job Log

The Road to Excellence Starts with Safety

The Road to Excellence Starts with Safety

| | | | |
|--|--------------------------|---|-------------------------|
| Sold To #: 343491 | Ship To #: 2093548 | Quote #: | Sales Order #: 6718222 |
| Customer: WEXPRO COMPANY E-BILL | | Customer Rep: Airdrill, Wexpro | |
| Well Name: Clay Basin Unit | | Well #: 66 | API/UWI #: 43-009-30067 |
| Field: CLAY BASIN | City (SAP): ROCK SPRINGS | County/Parish: Daggett | State: Utah |
| Legal Description: | | | |
| Lat: N 0 deg. OR N 0 deg. 0 min. 0 secs. | | Long: E 0 deg. OR E 0 deg. 0 min. 0 secs. | |
| Contractor: Questar | | Rig/Platform Name/Num: White Mtn Air Drill750 | |
| Job Purpose: Cement Surface Casing | | | Ticket Amount: |
| Well Type: Development Well | | Job Type: Cement Surface Casing | |
| Sales Person: VOLNER, THOMAS | | Srvc Supervisor: HORTON, ROBERT | MBU ID Emp #: 335512 |

| Activity Description | Date/Time | Cht # | Rate bbl/min | Volume bbl | | Pressure psig | | Comments |
|---------------------------|------------------|-------|--------------|------------|-------|---------------|--------|---|
| | | | | Stage | Total | Tubing | Casing | |
| Pre-Convoy Safety Meeting | 06/10/2009 11:00 | | | | | | | |
| Call Out | 06/10/2009 16:30 | | | | | | | |
| Arrive At Loc | 06/11/2009 02:00 | | | | | | | |
| Crew Leave Yard | 06/11/2009 12:00 | | | | | | | |
| Pre-Rig Up Safety Meeting | 06/11/2009 14:00 | | | | | | | |
| Rig-Up Completed | 06/11/2009 14:30 | | | | | | | |
| Pre-Job Safety Meeting | 06/11/2009 15:00 | | | | | | | |
| Start Job | 06/11/2009 15:16 | | | | | | | T.D. 536 T.P. 536 M.W. 8.34 S.J. 38.41 NO UNITS OF GAS DETECTED. NO PRIOR RIG PRESSURE. CHAINED DOWN HEAD DURING JOB. |
| Other | 06/11/2009 15:17 | | 2 | 5 | | | 5.0 | FILL LINES |
| Pump Spacer | 06/11/2009 15:46 | | 4 | 20 | | | 30.0 | LGC SPACER |
| Pump Cement | 06/11/2009 15:56 | | 4 | 59.9 | | | 51.0 | 265 SKS. 15.2 DEN. 1.27 YLD. 5.80 H2O REQ. |
| Shutdown | 06/11/2009 16:26 | | | | | | | |
| Drop Top Plug | 06/11/2009 16:29 | | | | | | | PLUG AWAY |
| Pump Displacement | 06/11/2009 16:32 | | 4 | 38.5 | | | 18.0 | |

Sold To #: 343491

Ship To #: 2093548

Quote #:

Sales Order #:

6718222

SUMMIT Version: 7.20.130

Thursday, June 11, 2009 05:50:00

HALLIBURTON

Cementing Job Log

| Activity Description | Date/Time | Cht # | Rate bbl/ min | Volume bbl | | Pressure psig | | Comments |
|-----------------------------|---------------------|----------|---------------------|---------------|-------|------------------|------------|--|
| | | | | Stage | Total | Tubing | Casing | |
| Slow Rate | 06/11/2009 16:38 | | 2 | 28.5 | | | 100.0 | |
| Bump Plug | 06/11/2009 16:48 | | 2 | 38.5 | | | 1764. 0 | PRESSURE TESTED CASING FOR 30 MINUTES PER COMPANY MAN |
| Check Floats | 06/11/2009 17:19 | | | | | | | FLOATS HELD 1/2 BBL. BACK |
| End Job | 06/11/2009 17:20 | | | | | | | LOST 15 BBLS OF FLUID DURING JOB. CIRCULATED 12 BBLS. OF CEMENT TO SURFACE. THANK YOU FOR USING HALLIBURTON OF ROCK SPRINGS WYOMING. |
| Pre-Rig Down Safety Meeting | 06/11/2009 17:30 | | | | | | | |
| Rig-Down Completed | 06/11/2009 17:45 | | | | | | | |
| Pre-Convoy Safety Meeting | 06/11/2009 17:46 | | | | | | | |
| Crew Leave Location | 06/11/2009 18:00 | | | | | | | |

Sold To # : 343491

Ship To # :2093548

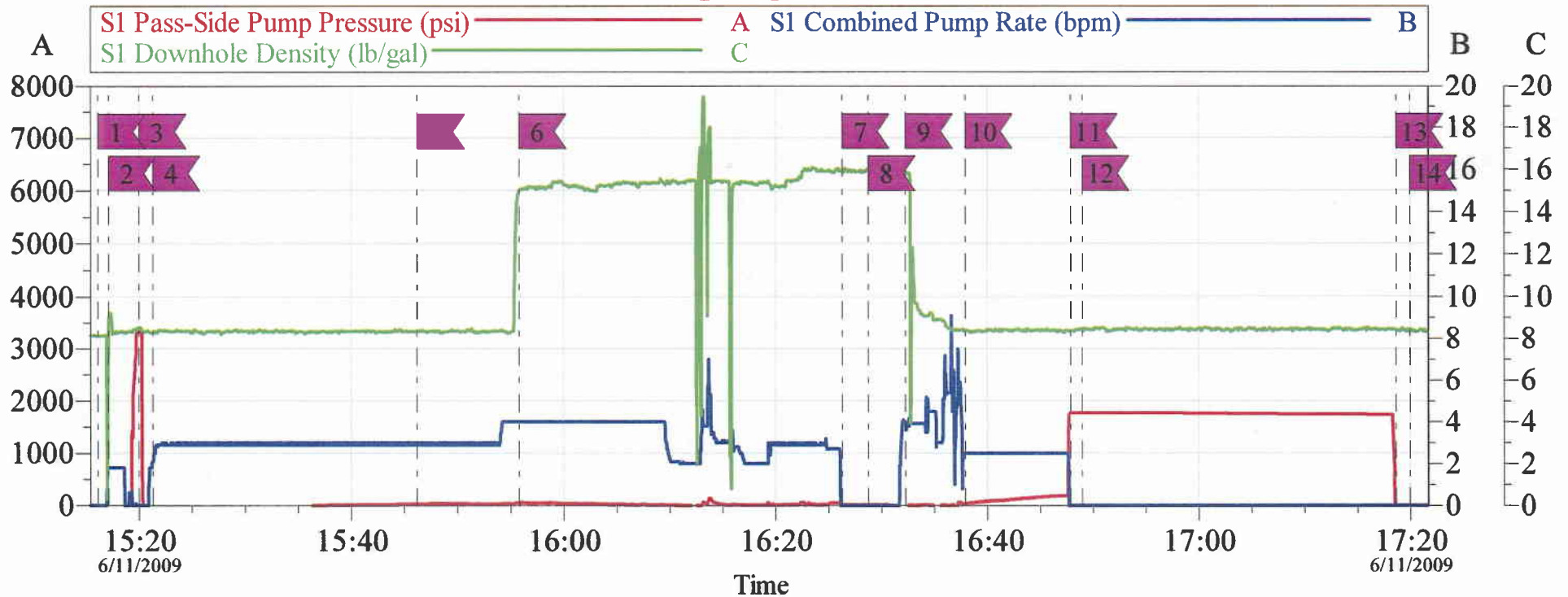
Quote # :

Sales Order # : 6718222

SUMMIT Version: 7.20.130

Thursday, June 11, 2009 05:50:00

Rock Springs Cement



Local Event Log

| Intersection | SPPP | Intersection | SPPP |
|---------------------|-----------------|----------------------|-----------------|
| 1 START JOB | 15:16:06 -6.000 | FILL LINES | 15:17:09 -1.000 |
| TEST LINES | 15:20:01 3324 | PUMP H2O AHEAD | 15:21:17 -7.000 |
| PUMP LGC SPACER | 15:46:11 30.00 | PUMP CEMENT | 15:55:49 51.00 |
| SHUTDOWN | 16:26:18 24.00 | DROP TOP PLUG | 16:28:45 19.00 |
| 9 PUMP DISPLACEMENT | 16:32:16 -4.000 | SLOW RATE | 16:37:55 36.91 |
| 11 BUMP PLUG | 16:47:51 1764 | PRESSURE TEST CASING | 16:48:58 1767 |
| 13 CHECK FLOATS | 17:18:39 -7.902 | END JOB | 17:19:55 -12.00 |

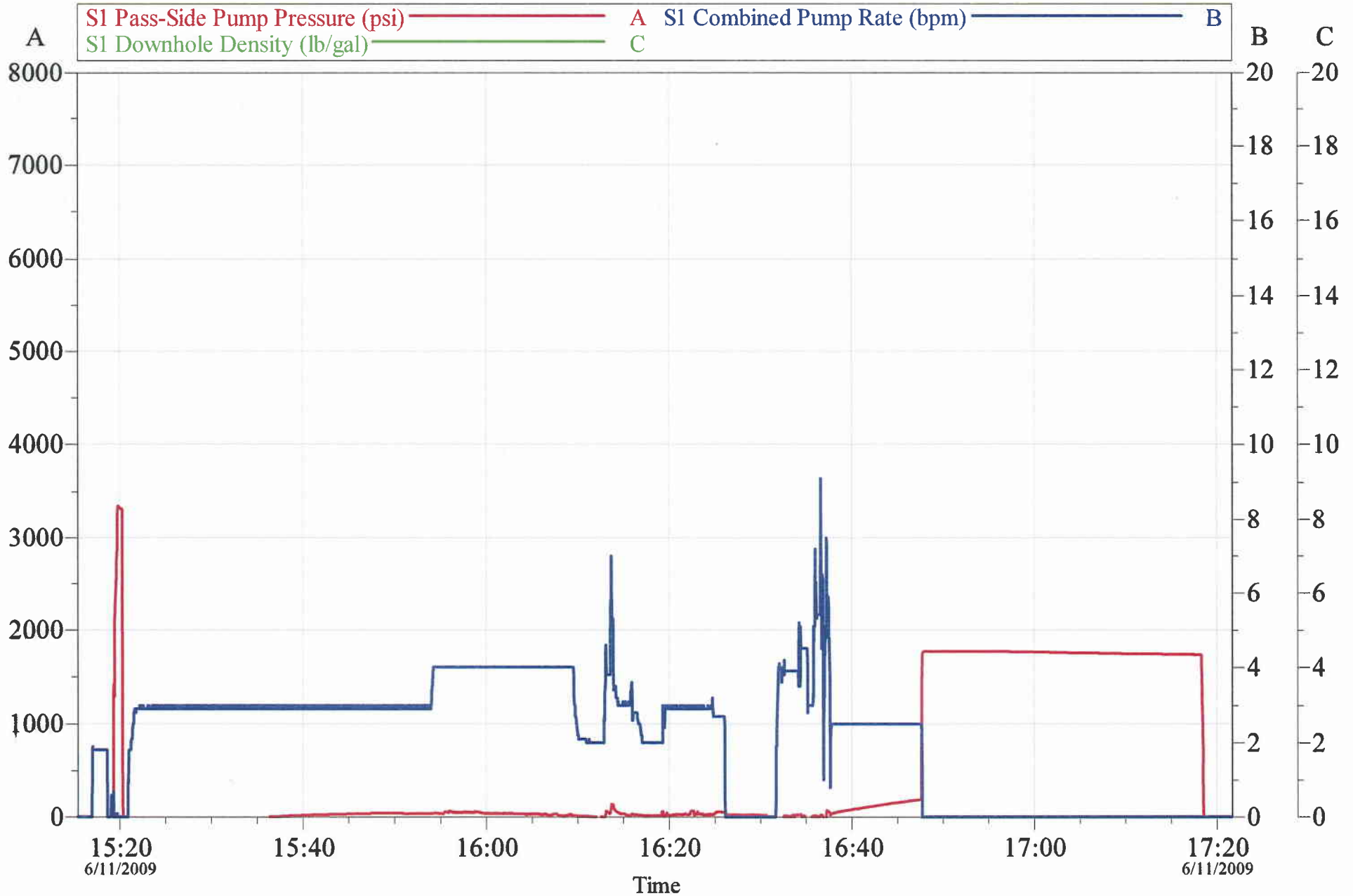
Customer:
Well Description:

Job Date: 11-Jun-2009
UWI:

Sales Order #: 6718222

OptiCem v6.4.2
11-Jun-09 17:52

Rock Springs Cement



Customer:
Well Description:

Job Date: 11-Jun-2009
UWI:

Sales Order #: 6718222

OptiCem v6.4.2
11-Jun-09 17:52

HALLIBURTON

Water Analysis Report

COMPANY: WEXPRO Date Recorded 6/16/2009

SUBMITTED BY: ROBERT HORTON SO# 6718222

LEASE: CLAY BASIN Job Type 9 5/8 SURFACE

WELL #: 66 Camp Location ROCK SPRINGS, WY.

CEMENT MIX WATER REQUIREMENTS

| Item | Recorded Test Value | Max Acceptable Limit | Potential Problems in Exceeding Limit |
|--------------------------|---------------------|----------------------|---|
| pH | 7.2 | 5 to 8.5 | Chemicals in water can cause severe retardation |
| Chlorides ^{1,2} | 0 | 3000 mg/L | Can accelerate the set time on cement 1% ~ 4800 mg/L |
| Total Alkalinity | 120 | 1000 mg/L | Cement is greatly retarded to the point where it may not set up at all, decrease strength of cement and possibly thicken cement slurry. (Typically occurs @ pH ≥ 8.3) |
| Total Hardness | 0 | 400 mg/L | Slightly shortens pump time on cement. |
| Sulfates | >200 | 1500 mg/L | Will greatly decrease the strength of cement |
| Iron | 0 | 300 mg/L | Could cause gelation issues with cement |
| Water Temp | 52 | 50F to 80F | High temps will accelerate; Low temps may risk freezing in cold weather |

NOTES:

1. If the water's pH is greater than or equal to 8, avoid using it since Magnesium may be present (there are no field test strips for Magnesium).

Submitted Respectfully by: _____

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS AND MINING

FORM 6

ENTITY ACTION FORM

Operator: WEXPRO COMPANY Operator Account Number: N 1070
Address: P.O. Box 458
city ROCK SPRINGS
state WY zip 82902 Phone Number: (307) 922-5647

Well 1

| API Number | Well Name | | QQ | Sec | Twp | Rng | County |
|---|-----------------------|-------------------|-----------|-----|-----|----------------------------------|---------|
| 4300930067 | CLAY BASIN 66 | | NWSE | 21 | 3N | 24E | DAGGETT |
| Action Code | Current Entity Number | New Entity Number | Spud Date | | | Entity Assignment Effective Date | |
| <i>AB</i> | <i>99999</i> | <i>1025</i> | 6/9/2009 | | | <i>7/30/09</i> | |
| Comments: <i>THIS WELL IS APPROVED TO PRODUCE FROM THE FRONTIER FORMATION.</i> <i>FRTR</i> | | | | | | | |

Well 2

| API Number | Well Name | | QQ | Sec | Twp | Rng | County |
|-------------|-----------------------|-------------------|-----------|-----|-----|----------------------------------|--------|
| | | | | | | | |
| Action Code | Current Entity Number | New Entity Number | Spud Date | | | Entity Assignment Effective Date | |
| | | | | | | | |
| Comments: | | | | | | | |

Well 3

| API Number | Well Name | | QQ | Sec | Twp | Rng | County |
|-------------|-----------------------|-------------------|-----------|-----|-----|----------------------------------|--------|
| | | | | | | | |
| Action Code | Current Entity Number | New Entity Number | Spud Date | | | Entity Assignment Effective Date | |
| | | | | | | | |
| Comments: | | | | | | | |

ACTION CODES:

- A - Establish new entity for new well (single well only)
- B - Add new well to existing entity (group or unit well)
- C - Re-assign well from one existing entity to another existing entity
- D - Re-assign well from one existing entity to a new entity
- E - Other (Explain in 'comments' section)

G.T. NIMMO

Name (Please Print)

Signature

OPERATIONS MANAGER

Title

Date

072209

RECEIVED

JUL 22 2009

DIV. OF OIL, GAS & MINING

| | | | | | |
|---|--|--|---|--|--|
| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 | | | |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL 045051B | | | |
| 1. TYPE OF WELL Gas Well | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: | | | |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN | | | |
| 3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902 | | 8. WELL NAME and NUMBER: CLAY BASIN U 66 | | | |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | 9. API NUMBER: 43009300670000 | | | |
| PHONE NUMBER: 307 922-5612 Ext | | 9. FIELD and POOL or WILDCAT: CLAY BASIN | | | |
| COUNTY: DAGGETT | | STATE: UTAH | | | |
| 11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA | | | | | |
| TYPE OF SUBMISSION | TYPE OF ACTION | | | | |
| <input checked="" type="checkbox"/> NOTICE OF INTENT Approximate date work will start: 8/25/2009 <input type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: <input type="checkbox"/> SPUD REPORT Date of Spud: <input type="checkbox"/> DRILLING REPORT Report Date: | <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION </td> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input checked="" type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> OTHER </td> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: _____ </td> </tr> </table> | | <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION | <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input checked="" type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> OTHER | <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: _____ |
| <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION | <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input checked="" type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> OTHER | <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: _____ | | | |
| 12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc. Please see attachment "Clay Basin 66". | | | | | |
| Accepted by the Utah Division of Oil, Gas and Mining | | | | | |
| Date: <u>August 27, 2009</u> By: <u><i>Dan K. Duff</i></u> | | | | | |
| NAME (PLEASE PRINT) Paul Jibson | PHONE NUMBER 307 922-5647 | TITLE Associate Permit Agent | | | |
| SIGNATURE N/A | | DATE 8/25/2009 | | | |

RECEIVED August 25, 2009

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004- 0137
Expires: July 31, 2010

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

SUBMIT IN TRIPLICATE - Other Instructions on reverse side.

| | | |
|---|---|--|
| 1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other | | 5. Lease Serial No. UTSL045051B |
| 2. Name of Operator WEXPRO COMPANY | | 6. If Indian, Allottee, or Tribe Name N/A |
| 3a. Address P.O. BOX 458 ROCK SPRINGS, WY 82902 | 3b. Phone No. (include area code) (307) 922-5647 | 7. If Unit or CA. Agreement Name and/or No. Clay Basin Unit UTU63009B |
| 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) SHL 2154' FSL 1974' FEL NW SE Sec. 21 T3N R24E BHL Same as Above | | 8. Well Name and No. Clay Basin Unit No. 66 |
| | | 9. API Well No. 43-009-30067 |
| | | 10. Field and Pool, or Exploratory Area Clay Basin |
| | | 11. County or Parish, State Daggett, Utah |

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | | |
|--|---|---|--|---|
| <input checked="" type="checkbox"/> Notice of Intent | <input type="checkbox"/> Acidize | <input type="checkbox"/> Deepen | <input type="checkbox"/> Production (Start/ Resume) | <input type="checkbox"/> Water Shut-off |
| <input type="checkbox"/> Subsequent Report | <input type="checkbox"/> Altering Casing | <input type="checkbox"/> Fracture Treat | <input checked="" type="checkbox"/> Reclamation | <input type="checkbox"/> Well Integrity |
| <input type="checkbox"/> Final Abandonment Notice | <input type="checkbox"/> Casing Repair | <input type="checkbox"/> New Construction | <input type="checkbox"/> Recomplete | <input type="checkbox"/> Other |
| | <input type="checkbox"/> Change Plans | <input type="checkbox"/> Plug and abandon | <input type="checkbox"/> Temporarily Abandon | |
| | <input type="checkbox"/> Convert to Injection | <input type="checkbox"/> Plug back | <input type="checkbox"/> Water Disposal | |

2 Describe Proposed or Completed Operation (clearly state all pertinent details including estimated starting date of any proposed work and approximate duration thereof.

If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths or pertinent markers and sands. Attach the Bond under which the work will be performed or provide the Bond No. on file with the BLM/ BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notice shall be filed only after all requirements, including reclamantion, have been completed, and the operator has determined that the site is ready for final inspection.)

The above well was SPUD on 6/10/09 (appropriate SPUD sundries have been submitted), due to drilling rig schedules and other issues, drilling of the above well will be completed at a later date.

With drilling being suspended, Wexpro Company intends to begin interim reclamation. Interim reclamation will consist of the following: closing the reserve pit, re-contouring the location, re-distributing the topsoil and seeding the location this fall. If the reserve pit is not dry, the water will be mechanically evaporated. The location will be seeded with the following seed mix: Shadscale 3 lbs/acre PLS, Gardner saltbush 3 lbs/acre PLS, Western Wheatgrass 3 lbs/acre PLS, and Wyoming Big Sage 0.5 lbs/acre PLS.

When drilling is to resume; the Vernal BLM office will be notified 48 hours prior to "Location Construction". Also the BLM will be notified of "Location Completion", prior to the rig moving onto location. Once drilling resumes a "Resume Operations" sundry will be submitted.

14. I hereby certify that the foregoing is true and correct.

Name (Printed/ Typed)

G.T. Nimmo

Title

Operations Manager

Signature

Electronically submitted on WIS and Utah's ePermit program
8/24/09

Date

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

Conditions of approval, if any are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office

Title 18 U.S.C. Section 1001 AND Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on page 2)

RECEIVED August 25, 2009

| | | |
|---|--|--|
| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL 045051B |
| 1. TYPE OF WELL Gas Well | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN |
| 3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902 | | 8. WELL NAME and NUMBER: CLAY BASIN U 66 |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | 9. API NUMBER: 43009300670000 |
| PHONE NUMBER: 307 922-5612 Ext | | 9. FIELD and POOL or WILDCAT: CLAY BASIN |
| COUNTY: DAGGETT | | STATE: UTAH |
| 11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA | | |
| TYPE OF SUBMISSION | TYPE OF ACTION | |
| <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: | <input type="checkbox"/> ACIDIZE | |
| <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 10/30/2009 | <input type="checkbox"/> ALTER CASING | |
| <input type="checkbox"/> SPUD REPORT Date of Spud: | <input type="checkbox"/> CHANGE TO PREVIOUS PLANS | |
| <input type="checkbox"/> DRILLING REPORT Report Date: | <input type="checkbox"/> CHANGE TUBING | |
| | <input type="checkbox"/> CHANGE WELL STATUS | |
| | <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS | |
| | <input type="checkbox"/> DEEPEN | |
| | <input type="checkbox"/> FRACTURE TREAT | |
| | <input type="checkbox"/> OPERATOR CHANGE | |
| | <input type="checkbox"/> PLUG AND ABANDON | |
| | <input type="checkbox"/> PRODUCTION START OR RESUME | |
| | <input type="checkbox"/> RECLAMATION OF WELL SITE | |
| | <input type="checkbox"/> REPERFORATE CURRENT FORMATION | |
| | <input type="checkbox"/> SIDETRACK TO REPAIR WELL | |
| | <input type="checkbox"/> TUBING REPAIR | |
| | <input type="checkbox"/> VENT OR FLARE | |
| | <input type="checkbox"/> WATER SHUTOFF | |
| | <input type="checkbox"/> SI TA STATUS EXTENSION | |
| | <input type="checkbox"/> WILDCAT WELL DETERMINATION | |
| | <input checked="" type="checkbox"/> OTHER | |
| | OTHER: Drilling Activity | |
| 12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc. | | |
| The above well was SPUD on 6/9/09, 60' of 20" conductor was set. On 6/10/09, 440' of surface casing was set. Due to drilling rig schedules and other issues, drilling of the above well will be completed at a later date. As required, Wexpro will submit a "Drilling Activity Status Report" monthly until the well is completed. This report will cover from July 1, 2009 to October 31, 2009. | | |
| <div style="text-align: right;"> Accepted by the Utah Division of Oil, Gas and Mining FOR RECORD ONLY November 03, 2009 </div> | | |
| NAME (PLEASE PRINT) Paul Jibson | PHONE NUMBER 307 922-5647 | TITLE Associate Permit Agent |
| SIGNATURE N/A | DATE 10/30/2009 | |

| | | |
|---|--|--|
| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL 045051B |
| 1. TYPE OF WELL Gas Well | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN |
| 3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902 | | 8. WELL NAME and NUMBER: CLAY BASIN U 66 |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | 9. API NUMBER: 43009300670000 |
| PHONE NUMBER: 307 922-5612 Ext | | 9. FIELD and POOL or WILDCAT: CLAY BASIN |
| COUNTY: DAGGETT | | STATE: UTAH |
| 11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA | | |
| TYPE OF SUBMISSION | TYPE OF ACTION | |
| <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: | <input type="checkbox"/> ACIDIZE | |
| <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 12/1/2009 | <input type="checkbox"/> ALTER CASING | |
| <input type="checkbox"/> SPUD REPORT Date of Spud: | <input type="checkbox"/> CASING REPAIR | |
| <input type="checkbox"/> DRILLING REPORT Report Date: | <input type="checkbox"/> CHANGE TO PREVIOUS PLANS | |
| | <input type="checkbox"/> CHANGE TUBING | |
| | <input type="checkbox"/> CHANGE WELL STATUS | |
| | <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS | |
| | <input type="checkbox"/> DEEPEN | |
| | <input type="checkbox"/> FRACTURE TREAT | |
| | <input type="checkbox"/> OPERATOR CHANGE | |
| | <input type="checkbox"/> PLUG AND ABANDON | |
| | <input type="checkbox"/> PRODUCTION START OR RESUME | |
| | <input type="checkbox"/> RECLAMATION OF WELL SITE | |
| | <input type="checkbox"/> REPERFORATE CURRENT FORMATION | |
| | <input type="checkbox"/> SIDETRACK TO REPAIR WELL | |
| | <input type="checkbox"/> TUBING REPAIR | |
| | <input type="checkbox"/> VENT OR FLARE | |
| | <input type="checkbox"/> WATER SHUTOFF | |
| | <input type="checkbox"/> SI TA STATUS EXTENSION | |
| | <input type="checkbox"/> WILDCAT WELL DETERMINATION | |
| | <input checked="" type="checkbox"/> OTHER | |
| | OTHER: <input type="text" value="Drilling Activity"/> | |
| 12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc. | | |
| The above well was SPUD on 6/9/09, 60' of 20" conductor was set. On 6/10/09, 440' of surface casing was set. Due to rig schedules and other issues, drilling of the above well will be completed at a later date. As required, Wexpro will submit a "Drilling Activity Status Report" monthly until the well is completed. This report covers from November 1, 2009 to November 30, 2009. | | |
| <div style="text-align: right;"> Accepted by the Utah Division of Oil, Gas and Mining FOR RECORD ONLY December 01, 2009 </div> | | |
| NAME (PLEASE PRINT) Paul Jibson | PHONE NUMBER 307 922-5647 | TITLE Associate Permit Agent |
| SIGNATURE N/A | DATE 12/1/2009 | |

| | | |
|--|--|--|
| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL 045051B |
| 1. TYPE OF WELL Gas Well | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN |
| 3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902 | | 8. WELL NAME and NUMBER: CLAY BASIN U 66 |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | 9. API NUMBER: 43009300670000 |
| PHONE NUMBER: 307 922-5612 Ext | | 9. FIELD and POOL or WILDCAT: CLAY BASIN |
| COUNTY: DAGGETT | | STATE: UTAH |
| 11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA | | |
| TYPE OF SUBMISSION | TYPE OF ACTION | |
| <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: | <input type="checkbox"/> ACIDIZE | |
| <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 1/1/2010 | <input type="checkbox"/> ALTER CASING | |
| <input type="checkbox"/> SPUD REPORT Date of Spud: | <input type="checkbox"/> CHANGE TO PREVIOUS PLANS | |
| <input type="checkbox"/> DRILLING REPORT Report Date: | <input type="checkbox"/> CHANGE TUBING | |
| | <input type="checkbox"/> CHANGE WELL STATUS | |
| | <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS | |
| | <input type="checkbox"/> DEEPEN | |
| | <input type="checkbox"/> FRACTURE TREAT | |
| | <input type="checkbox"/> OPERATOR CHANGE | |
| | <input type="checkbox"/> PLUG AND ABANDON | |
| | <input type="checkbox"/> PRODUCTION START OR RESUME | |
| | <input type="checkbox"/> RECLAMATION OF WELL SITE | |
| | <input type="checkbox"/> REPERFORATE CURRENT FORMATION | |
| | <input type="checkbox"/> SIDETRACK TO REPAIR WELL | |
| | <input type="checkbox"/> TUBING REPAIR | |
| | <input type="checkbox"/> VENT OR FLARE | |
| | <input type="checkbox"/> WATER SHUTOFF | |
| | <input type="checkbox"/> SI TA STATUS EXTENSION | |
| | <input type="checkbox"/> WILDCAT WELL DETERMINATION | |
| | <input checked="" type="checkbox"/> OTHER | |
| | OTHER: Drilling Activity | |
| 12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc. | | |
| The above well was spud on 6/9/09. 60' of 20" conductor was set. On 6/10/09, 440' of surface casing was set. Due to rig schedules and other issues, drilling of the above well will be completed at a later date. As required, Wexpro will submit a "Drilling Activity Status Report" monthly until the drilling of the well resumes. This report covers from December 1, 2009 to December 31, 2009. | | |
| <div style="text-align: right;"> Accepted by the Utah Division of Oil, Gas and Mining FOR RECORD ONLY January 04, 2010 </div> | | |
| NAME (PLEASE PRINT) Paul Jibson | PHONE NUMBER 307 922-5647 | TITLE Associate Permit Agent |
| SIGNATURE N/A | DATE 1/4/2010 | |

| | | |
|--|--|--|
| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL 045051B |
| 1. TYPE OF WELL Gas Well | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN |
| 3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902 | | 8. WELL NAME and NUMBER: CLAY BASIN U 66 |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | 9. API NUMBER: 43009300670000 |
| PHONE NUMBER: 307 922-5612 Ext | | 9. FIELD and POOL or WILDCAT: CLAY BASIN |
| COUNTY: DAGGETT | | STATE: UTAH |
| 11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA | | |
| TYPE OF SUBMISSION | TYPE OF ACTION | |
| <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: | <input type="checkbox"/> ACIDIZE | |
| <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 2/2/2010 | <input type="checkbox"/> ALTER CASING | |
| <input type="checkbox"/> SPUD REPORT Date of Spud: | <input type="checkbox"/> CHANGE TO PREVIOUS PLANS | |
| <input type="checkbox"/> DRILLING REPORT Report Date: | <input type="checkbox"/> CHANGE TUBING | |
| | <input type="checkbox"/> CHANGE WELL STATUS | |
| | <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS | |
| | <input type="checkbox"/> DEEPEN | |
| | <input type="checkbox"/> FRACTURE TREAT | |
| | <input type="checkbox"/> OPERATOR CHANGE | |
| | <input type="checkbox"/> PLUG AND ABANDON | |
| | <input type="checkbox"/> PRODUCTION START OR RESUME | |
| | <input type="checkbox"/> RECLAMATION OF WELL SITE | |
| | <input type="checkbox"/> REPERFORATE CURRENT FORMATION | |
| | <input type="checkbox"/> SIDETRACK TO REPAIR WELL | |
| | <input type="checkbox"/> TUBING REPAIR | |
| | <input type="checkbox"/> VENT OR FLARE | |
| | <input type="checkbox"/> WATER SHUTOFF | |
| | <input type="checkbox"/> SI TA STATUS EXTENSION | |
| | <input type="checkbox"/> WILDCAT WELL DETERMINATION | |
| | <input checked="" type="checkbox"/> OTHER | |
| | OTHER: Drilling Activity | |
| 12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc. | | |
| The above well was spud on 6/9/09, 60' of 20" conductor was set. On 6/10/09, 440' of surface casing was set. Due to rig schedules and other issues, drilling of the above well will be completed at a later date. As required, Wexpro will submit a monthly "Drilling Activity Status Report" until the drilling of the well resumes. This report covers from January 1, 2010 to January 31, 2010. | | |
| Accepted by the Utah Division of Oil, Gas and Mining FOR RECORD ONLY February 02, 2010 | | |
| NAME (PLEASE PRINT) Paul Jibson | PHONE NUMBER 307 922-5647 | TITLE Associate Permit Agent |
| SIGNATURE N/A | DATE 2/2/2010 | |

| | | |
|--|--|--|
| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL 045051B |
| 1. TYPE OF WELL Gas Well | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN |
| 3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902 | | 8. WELL NAME and NUMBER: CLAY BASIN U 66 |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | 9. API NUMBER: 43009300670000 |
| PHONE NUMBER: 307 922-5612 Ext | | 9. FIELD and POOL or WILDCAT: CLAY BASIN |
| COUNTY: DAGGETT | | STATE: UTAH |
| 11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA | | |
| TYPE OF SUBMISSION | TYPE OF ACTION | |
| <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: | <input type="checkbox"/> ACIDIZE | |
| <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 4/30/2010 | <input type="checkbox"/> ALTER CASING | |
| <input type="checkbox"/> SPUD REPORT Date of Spud: | <input type="checkbox"/> CHANGE TO PREVIOUS PLANS | |
| <input type="checkbox"/> DRILLING REPORT Report Date: | <input type="checkbox"/> CHANGE TUBING | |
| | <input type="checkbox"/> CHANGE WELL STATUS | |
| | <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS | |
| | <input type="checkbox"/> DEEPEN | |
| | <input type="checkbox"/> FRACTURE TREAT | |
| | <input type="checkbox"/> OPERATOR CHANGE | |
| | <input type="checkbox"/> PLUG AND ABANDON | |
| | <input type="checkbox"/> PRODUCTION START OR RESUME | |
| | <input type="checkbox"/> RECLAMATION OF WELL SITE | |
| | <input type="checkbox"/> REPERFORATE CURRENT FORMATION | |
| | <input type="checkbox"/> SIDETRACK TO REPAIR WELL | |
| | <input type="checkbox"/> TUBING REPAIR | |
| | <input type="checkbox"/> VENT OR FLARE | |
| | <input type="checkbox"/> WATER SHUTOFF | |
| | <input type="checkbox"/> SI TA STATUS EXTENSION | |
| | <input type="checkbox"/> WILDCAT WELL DETERMINATION | |
| | <input checked="" type="checkbox"/> OTHER | |
| | OTHER: Drilling Activity | |
| 12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc. | | |
| The above well was spud on 6/9/09. 60' of 20" conductor was set. On 6/10/09, 440' of surface casing was set. Due to rig schedules and other issues, the drilling of the above well will be completed at a later date. As required, Wexpro will submit a "Drilling Activity Status Report" monthly until the drilling of the well resumes. This report covers from April 1, 2010 to April 30, 2010. | | |
| Accepted by the Utah Division of Oil, Gas and Mining FOR RECORD ONLY May 05, 2010 | | |
| NAME (PLEASE PRINT) Paul Jibson | PHONE NUMBER 307 922-5647 | TITLE Permit Agent |
| SIGNATURE N/A | DATE 4/30/2010 | |

| | | |
|--|--|--|
| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL 045051B |
| 1. TYPE OF WELL Gas Well | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN |
| 3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902 | | 8. WELL NAME and NUMBER: CLAY BASIN U 66 |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | 9. API NUMBER: 43009300670000 |
| PHONE NUMBER: 307 922-5612 Ext | | 9. FIELD and POOL or WILDCAT: CLAY BASIN |
| COUNTY: DAGGETT | | STATE: UTAH |
| 11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA | | |
| TYPE OF SUBMISSION | TYPE OF ACTION | |
| <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: | <input type="checkbox"/> ACIDIZE | |
| <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 4/1/2010 | <input type="checkbox"/> ALTER CASING | |
| <input type="checkbox"/> SPUD REPORT Date of Spud: | <input type="checkbox"/> CHANGE TO PREVIOUS PLANS | |
| <input type="checkbox"/> DRILLING REPORT Report Date: | <input type="checkbox"/> CHANGE TUBING | |
| | <input type="checkbox"/> CHANGE WELL STATUS | |
| | <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS | |
| | <input type="checkbox"/> DEEPEN | |
| | <input type="checkbox"/> FRACTURE TREAT | |
| | <input type="checkbox"/> OPERATOR CHANGE | |
| | <input type="checkbox"/> PLUG AND ABANDON | |
| | <input type="checkbox"/> PRODUCTION START OR RESUME | |
| | <input type="checkbox"/> RECLAMATION OF WELL SITE | |
| | <input type="checkbox"/> REPERFORATE CURRENT FORMATION | |
| | <input type="checkbox"/> SIDETRACK TO REPAIR WELL | |
| | <input type="checkbox"/> TUBING REPAIR | |
| | <input type="checkbox"/> VENT OR FLARE | |
| | <input type="checkbox"/> WATER SHUTOFF | |
| | <input type="checkbox"/> SI TA STATUS EXTENSION | |
| | <input type="checkbox"/> WILDCAT WELL DETERMINATION | |
| | <input checked="" type="checkbox"/> OTHER | |
| | OTHER: Drilling Activity | |
| 12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc. | | |
| The above well was spud on 6/9/09. 60' of 20" conductor was set. On 6/10/09, 440' of surface casing was set. Due to rig schedules and other issues, drilling of the above well will be completed at a later date. As required, Wexpro will submit a "Drilling Activity Status Report" monthly until the drilling of the well resumes. This report covers from March 1, 2010 to March 31, 2010. | | |
| Accepted by the Utah Division of Oil, Gas and Mining FOR RECORD ONLY April 01, 2010 | | |
| NAME (PLEASE PRINT) Paul Jibson | PHONE NUMBER 307 922-5647 | TITLE Permit Agent |
| SIGNATURE N/A | DATE 4/1/2010 | |

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| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL 045051B |
| 1. TYPE OF WELL Gas Well | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN |
| 3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902 | | 8. WELL NAME and NUMBER: CLAY BASIN U 66 |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | 9. API NUMBER: 43009300670000 |
| PHONE NUMBER: 307 922-5612 Ext | | 9. FIELD and POOL or WILDCAT: CLAY BASIN |
| COUNTY: DAGGETT | | STATE: UTAH |
| 11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA | | |
| TYPE OF SUBMISSION | TYPE OF ACTION | |
| <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: | <input type="checkbox"/> ACIDIZE | |
| <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 4/30/2010 | <input type="checkbox"/> ALTER CASING | |
| <input type="checkbox"/> SPUD REPORT Date of Spud: | <input type="checkbox"/> CHANGE TO PREVIOUS PLANS | |
| <input type="checkbox"/> DRILLING REPORT Report Date: | <input type="checkbox"/> CHANGE TUBING | |
| | <input type="checkbox"/> CHANGE WELL STATUS | |
| | <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS | |
| | <input type="checkbox"/> DEEPEN | |
| | <input type="checkbox"/> FRACTURE TREAT | |
| | <input type="checkbox"/> OPERATOR CHANGE | |
| | <input type="checkbox"/> PLUG AND ABANDON | |
| | <input type="checkbox"/> PRODUCTION START OR RESUME | |
| | <input type="checkbox"/> RECLAMATION OF WELL SITE | |
| | <input type="checkbox"/> REPERFORATE CURRENT FORMATION | |
| | <input type="checkbox"/> SIDETRACK TO REPAIR WELL | |
| | <input type="checkbox"/> TUBING REPAIR | |
| | <input type="checkbox"/> VENT OR FLARE | |
| | <input type="checkbox"/> WATER SHUTOFF | |
| | <input type="checkbox"/> SI TA STATUS EXTENSION | |
| | <input type="checkbox"/> WILDCAT WELL DETERMINATION | |
| | <input checked="" type="checkbox"/> OTHER | |
| | OTHER: Drilling Activity | |
| 12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc. | | |
| The above well was spud on 6/9/09. 60' of 20" conductor was set. On 6/10/09, 440' of surface casing was set. Due to rig schedules and other issues, the drilling of the above well will be completed at a later date. As required, Wexpro will submit a "Drilling Activity Status Report" monthly until the drilling of the well resumes. This report covers from April 1, 2010 to April 30, 2010. | | |
| <div style="text-align: right;"> Accepted by the Utah Division of Oil, Gas and Mining FOR RECORD ONLY May 05, 2010 </div> | | |
| NAME (PLEASE PRINT) Paul Jibson | PHONE NUMBER 307 922-5647 | TITLE Permit Agent |
| SIGNATURE N/A | DATE 4/30/2010 | |

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|--|--|--|
| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL 045051B |
| 1. TYPE OF WELL Gas Well | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN |
| 3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902 | | 8. WELL NAME and NUMBER: CLAY BASIN U 66 |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | 9. API NUMBER: 43009300670000 |
| PHONE NUMBER: 307 922-5612 Ext | | 9. FIELD and POOL or WILDCAT: CLAY BASIN |
| 11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA | | COUNTY: DAGGETT |
| STATE: UTAH | | |
| TYPE OF SUBMISSION | TYPE OF ACTION | |
| <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: | <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION | |
| <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 7/1/2010 | <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input checked="" type="checkbox"/> OTHER | |
| <input type="checkbox"/> SPUD REPORT Date of Spud: | <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION | |
| <input type="checkbox"/> DRILLING REPORT Report Date: | OTHER: <input type="text" value="Drilling Activity"/> | |
| 12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc. The above well was spud on 6/9/09. 60' of 20" conductor was set. On 6/10/09, 440' of surface casing was set. Due to rig schedules and other issues, the drilling of the above well will be completed at a later date. As required, Wexpro will submit a "Drilling Activity Status Report" monthly, until the drilling of the well resumes. This report covers from June 1, 2010 to July 30, 2010. | | |
| Accepted by the Utah Division of Oil, Gas and Mining FOR RECORD ONLY July 06, 2010 | | |
| NAME (PLEASE PRINT) Paul Jibson | PHONE NUMBER 307 922-5647 | TITLE Permit Agent |
| SIGNATURE N/A | | DATE 7/2/2010 |

| | | |
|--|--|--|
| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL 045051B |
| 1. TYPE OF WELL Gas Well | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN |
| 3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902 | | 8. WELL NAME and NUMBER: CLAY BASIN U 66 |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | 9. API NUMBER: 43009300670000 |
| PHONE NUMBER: 307 922-5612 Ext | | 9. FIELD and POOL or WILDCAT: CLAY BASIN |
| COUNTY: DAGGETT | | STATE: UTAH |

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | |
|---|---|--|---|
| <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: | <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION | <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input checked="" type="checkbox"/> OTHER | <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: <input style="width: 100px;" type="text" value="Drilling Activity"/> |
| <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 7/31/2010 | | | |
| <input type="checkbox"/> SPUD REPORT Date of Spud: | | | |
| <input type="checkbox"/> DRILLING REPORT Report Date: | | | |

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

The above well was spud on 6/9/09. 60' of 20" conductor was set. On 6/10/09, 440' of surface casing was set. Due to rig schedules and other issues, the drilling of the above well will be completed at a later date. As required, Wexpro will submit a "Drilling Activity Status Report" monthly until the drilling of the well resumes. This report covers from July 1, 2010 to July 31, 2010.

Accepted by the
Utah Division of
Oil, Gas and Mining
FOR RECORD ONLY
 August 05, 2010

| | | |
|---|-------------------------------------|------------------------------|
| NAME (PLEASE PRINT) Paul Jibson | PHONE NUMBER 307 922-5647 | TITLE Permit Agent |
| SIGNATURE N/A | DATE 8/4/2010 | |

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|--|--|--|
| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL 045051B |
| 1. TYPE OF WELL Gas Well | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN |
| 3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902 | | 8. WELL NAME and NUMBER: CLAY BASIN U 66 |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | 9. API NUMBER: 43009300670000 |
| PHONE NUMBER: 307 922-5612 Ext | | 9. FIELD and POOL or WILDCAT: CLAY BASIN |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | COUNTY: DAGGETT |
| STATE: UTAH | | |

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | |
|--|---|--|---|
| <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: | <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION | <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input checked="" type="checkbox"/> OTHER | <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: <input style="width: 100px;" type="text" value="Drilling Activity"/> |
| <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 8/31/2010 | | | |
| <input type="checkbox"/> SPUD REPORT Date of Spud: | | | |
| <input type="checkbox"/> DRILLING REPORT Report Date: | | | |

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

The above well was spud on 6/9/09, 60' of 20" conductor was set. On 6/10/09, 440' of surface casing was set. Due to rig schedules and other issues, the drilling of the above well will be completed at a later date. As required, Wexpro will submit a "Drilling Activity Status Report" monthly until the drilling of the well resumes. This report covers from August 1, 2010 to August 31, 2010.

| | | |
|---|-------------------------------------|------------------------------|
| NAME (PLEASE PRINT) Paul Jibson | PHONE NUMBER 307 922-5647 | TITLE Permit Agent |
| SIGNATURE N/A | DATE 9/2/2010 | |

Accepted by the
Utah Division of
Oil, Gas and Mining
FOR RECORD ONLY
 September 02, 2010

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| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL 045051B |
| 1. TYPE OF WELL Gas Well | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN |
| 3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902 | | 8. WELL NAME and NUMBER: CLAY BASIN U 66 |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | 9. API NUMBER: 43009300670000 |
| PHONE NUMBER: 307 922-5612 Ext | | 9. FIELD and POOL or WILDCAT: CLAY BASIN |
| COUNTY: DAGGETT | | STATE: UTAH |

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | |
|---|---|---|---|
| <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: | <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION | <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION | <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: <input style="width: 100px;" type="text" value="Drilling Activity"/> |
| <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 9/30/2010 | | | |
| <input type="checkbox"/> SPUD REPORT Date of Spud: | | | |
| <input type="checkbox"/> DRILLING REPORT Report Date: | | | |

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

The above well was spud on 6/9/09, 60' of 20" conductor was set. On 6/10/09, 440' of surface casing was set. Due to rig schedules and other issues, the drilling of the above well will be completed at a later date. As required, Wexpro will submit a "Drilling Activity Status Report" monthly until the drilling of the well resumes. This report covers from September 1, 2010 to September 30, 2010.

| | | |
|---|-------------------------------------|------------------------------|
| NAME (PLEASE PRINT) Paul Jibson | PHONE NUMBER 307 922-5647 | TITLE Permit Agent |
| SIGNATURE N/A | DATE 10/4/2010 | |

Accepted by the
Utah Division of
Oil, Gas and Mining
FOR RECORD ONLY
 October 05, 2010

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| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 |
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| 1. TYPE OF WELL Gas Well | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN |
| 3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902 | | 8. WELL NAME and NUMBER: CLAY BASIN U 66 |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | 9. API NUMBER: 43009300670000 |
| PHONE NUMBER: 307 922-5612 Ext | | 9. FIELD and POOL or WILDCAT: CLAY BASIN |
| COUNTY: DAGGETT | | STATE: UTAH |

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | |
|--|---|---|--|
| <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: | <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION | <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION | <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION |
| <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 10/31/2010 | <input checked="" type="checkbox"/> OTHER | | |
| <input type="checkbox"/> SPUD REPORT Date of Spud: | OTHER: <input style="width: 100px;" type="text" value="Drilling Activity"/> | | |
| <input type="checkbox"/> DRILLING REPORT Report Date: | | | |

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

The above well was spud on 6/9/09, 60' of 20" conductor was set. On 6/10/09, 440' of surface casing was set. Due to rig schedules and other issues, the drilling of the above well will be completed at a later date. As required, Wexpro will submit a "Drilling Activity Status Report" monthly until the drilling of the well resumes. This report covers from October 1, 2010 to October 31, 2010

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|---|-------------------------------------|------------------------------|
| NAME (PLEASE PRINT) Paul Jibson | PHONE NUMBER 307 922-5647 | TITLE Permit Agent |
| SIGNATURE N/A | DATE 11/1/2010 | |

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|--|--|--|
| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL 045051B |
| | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: |
| 1. TYPE OF WELL Gas Well | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | | 8. WELL NAME and NUMBER: CLAY BASIN U 66 |
| 3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902 | | 9. API NUMBER: 43009300670000 |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | 9. FIELD and POOL or WILDCAT: CLAY BASIN |
| | | COUNTY: DAGGETT |
| | | STATE: UTAH |

11.

CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | |
|---|---|--|---|
| <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: | <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION | <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input checked="" type="checkbox"/> OTHER | <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: <input type="text" value="Drilling Activity"/> |
| <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 11/30/2010 | | | |
| <input type="checkbox"/> SPUD REPORT Date of Spud: | | | |
| <input type="checkbox"/> DRILLING REPORT Report Date: | | | |

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

The above well was spud on 6/9/09, 60' of 20" conductor was set. On 6/10/09, 440' of surface casing was set. Due to rig schedules and other issues, the drilling of the above well will be completed at a later date. As required, Wexpro will submit a "Drilling Activity Status Report" monthly until the drilling of the well resumes. This report covers from November 1, 2010 to November 30, 2010.

Accepted by the
Utah Division of
Oil, Gas and Mining
FOR RECORD ONLY

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|---|-------------------------------------|------------------------------|
| NAME (PLEASE PRINT) Paul Jibson | PHONE NUMBER 307 922-5647 | TITLE Permit Agent |
| SIGNATURE N/A | | DATE 12/2/2010 |

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| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL 045051B |
| 1. TYPE OF WELL Gas Well | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN |
| 3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902 | | 8. WELL NAME and NUMBER: CLAY BASIN U 66 |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | 9. API NUMBER: 43009300670000 |
| PHONE NUMBER: 307 922-5612 Ext | | 9. FIELD and POOL or WILDCAT: CLAY BASIN |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | COUNTY: DAGGETT |
| STATE: UTAH | | |

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | |
|---|---|--|---|
| <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: | <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION | <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input checked="" type="checkbox"/> OTHER | <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: <input style="width: 100px;" type="text" value="Drilling Activity"/> |
| <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 12/31/2010 | | | |
| <input type="checkbox"/> SPUD REPORT Date of Spud: | | | |
| <input type="checkbox"/> DRILLING REPORT Report Date: | | | |

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

The above well was spud on 6/9/09, 60' of 20" conductor was set. On 6/10/09, 440' of surface casing was set. Due to rig schedules and other issues, the drilling of the above well will be completed at a later date. As required, Wexpro will submit a "Drilling Activity Status Report" monthly until the drilling of the well resumes. This report covers from December 1, 2010 to December 31, 2010.

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|---|-------------------------------------|------------------------------|
| NAME (PLEASE PRINT) Paul Jibson | PHONE NUMBER 307 922-5647 | TITLE Permit Agent |
| SIGNATURE N/A | DATE 1/3/2011 | |

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| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL 045051B |
| 1. TYPE OF WELL Gas Well | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN |
| 3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902 | | 8. WELL NAME and NUMBER: CLAY BASIN U 66 |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | 9. API NUMBER: 43009300670000 |
| PHONE NUMBER: 307 922-5612 Ext | | 9. FIELD and POOL or WILDCAT: CLAY BASIN |
| COUNTY: DAGGETT | | STATE: UTAH |

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | |
|---|---|---|---|
| <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: | <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION | <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION | <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: <input style="width: 100px;" type="text" value="Drilling Activity"/> |
| <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 1/31/2011 | | | |
| <input type="checkbox"/> SPUD REPORT Date of Spud: | | | |
| <input type="checkbox"/> DRILLING REPORT Report Date: | | | |

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

The above well was spud on 6/9/09, 60' of 20" conductor was set. On 6/10/09, 440' of surface casing was set. Due to rig schedules and other issues, the drilling of the above well will be completed at a later date. As required, Wexpro will submit a "Drilling Activity Status Report" monthly until the drilling of the well resumes. This report covers from January 1, 2011 to January 31, 2011.

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| NAME (PLEASE PRINT) Paul Jibson | PHONE NUMBER 307 922-5647 | TITLE Permit Agent |
| SIGNATURE N/A | DATE 2/1/2011 | |

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| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL 045051B |
| 1. TYPE OF WELL Gas Well | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN |
| 3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902 | | 8. WELL NAME and NUMBER: CLAY BASIN U 66 |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | 9. API NUMBER: 43009300670000 |
| PHONE NUMBER: 307 922-5612 Ext | | 9. FIELD and POOL or WILDCAT: CLAY BASIN |
| COUNTY: DAGGETT | | STATE: UTAH |

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | |
|---|---|---|---|
| <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: | <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION | <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION | <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: <input style="width: 100px;" type="text" value="Drilling Activity"/> |
| <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 2/28/2011 | | | |
| <input type="checkbox"/> SPUD REPORT Date of Spud: | | | |
| <input type="checkbox"/> DRILLING REPORT Report Date: | | | |

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

The above well was spud on 6/9/09, 60' of 20" conductor was set. On 6/10/09, 440' of surface casing was set. Due to rig schedules and other issues, the drilling of the above well will be completed at a later date. As required, Wexpro will submit a "Drilling Activity Status Report" monthly until the drilling of the well resumes. This report covers from February 1, 2011 to February 28, 2011.

| | | |
|---|-------------------------------------|------------------------------|
| NAME (PLEASE PRINT) Paul Jibson | PHONE NUMBER 307 352-7561 | TITLE Permit Agent |
| SIGNATURE N/A | DATE 3/1/2011 | |

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Utah Division of
Oil, Gas and Mining
FOR RECORD ONLY

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| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL 045051B |
| 1. TYPE OF WELL Gas Well | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN |
| 3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902 | | 8. WELL NAME and NUMBER: CLAY BASIN U 66 |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | 9. API NUMBER: 43009300670000 |
| 9. FIELD and POOL or WILDCAT: CLAY BASIN | | COUNTY: DAGGETT |
| STATE: UTAH | | |

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | |
|--|---|--|--|
| <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: | <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION | <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input checked="" type="checkbox"/> OTHER | <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: Drilling Activity |
| <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 3/31/2011 | | | |
| <input type="checkbox"/> SPUD REPORT Date of Spud: | | | |
| <input type="checkbox"/> DRILLING REPORT Report Date: | | | |

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

The above well was spud on 6/9/09, 60' of 20" conductor was set. On 6/10/09, 440' of surface casing was set. Due to rig schedules and other issues, the drilling of the above well will be completed at a later date. As required, Wexpro will submit a "Drilling Activity Status Report" monthly until the drilling of the well resumes. This report covers from March 1, 2011 to March 31, 2011.

Accepted by the
 Utah Division of
 Oil, Gas and Mining
FOR RECORD ONLY

| | | |
|---|-------------------------------------|------------------------------|
| NAME (PLEASE PRINT) Paul Jibson | PHONE NUMBER 307 352-7561 | TITLE Permit Agent |
| SIGNATURE N/A | DATE 4/1/2011 | |

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|---|--|---|---|--|---|
| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 | | | |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL 045051B | | | |
| 1. TYPE OF WELL Gas Well | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: | | | |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN | | | |
| 3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902 | | 8. WELL NAME and NUMBER: CLAY BASIN U 66 | | | |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | 9. API NUMBER: 43009300670000 | | | |
| 10. FIELD and POOL or WILDCAT: CLAY BASIN | | COUNTY: DAGGETT | | | |
| 11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA | | STATE: UTAH | | | |
| TYPE OF SUBMISSION <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 4/30/2011 <input type="checkbox"/> SPUD REPORT Date of Spud: <input type="checkbox"/> DRILLING REPORT Report Date: | TYPE OF ACTION <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION </td> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input checked="" type="checkbox"/> OTHER </td> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: <input type="text" value="Drilling Activity"/> </td> </tr> </table> | | <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION | <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input checked="" type="checkbox"/> OTHER | <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: <input type="text" value="Drilling Activity"/> |
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| 12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc. The above well was spud on 6/9/09, 60' of 20" conductor was set. On 6/10/09, 440' of surface casing was set. Due to rig schedules and other issues, the drilling of the above well will be completed at a later date. As required, Wexpro will submit a "Drilling Activity Status Report" monthly until the drilling of the well resumes. This report covers from April 1, 2011 to April 30, 2011. | | | | | |
| NAME (PLEASE PRINT) Paul Jibson | | PHONE NUMBER 307 352-7561 | | | |
| SIGNATURE N/A | | TITLE Permit Agent | | | |
| DATE 5/2/2011 | | FOR RECORD ONLY | | | |

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

RECEIVED

MAR 22 2011

FORM APPROVED
OMB NO. 1004-0135
Expires: July 31, 2010

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.

BLM

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

| | | |
|--|--|--|
| 1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other | | 5. Lease Serial No. UTSL045051B |
| 2. Name of Operator WEXPRO COMPANY | | 6. If Indian, Allottee or Tribe Name |
| 3a. Address 1955 BLAIRTOWN ROAD ROCK SPRINGS, WY 82902 | | 7. If Unit or CA/Agreement, Name and/or No. UTU63009B |
| 3b. Phone No. (include area code) Ph: 307-922-5647 Fx: 307-352-7575 | | 8. Well Name and No. CLAY BASIN UNIT 66 |
| 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 21 T3N R24E NWSE 2154FSL 1974FEL | | 9. API Well No. 43-009-30067-00-X1 |
| | | 10. Field and Pool, or Exploratory CLAY BASIN |
| | | 11. County or Parish, and State DAGGETT COUNTY, UT |

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | | |
|--|---|---|--|---|
| <input checked="" type="checkbox"/> Notice of Intent | <input type="checkbox"/> Acidize | <input type="checkbox"/> Deepen | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off |
| <input type="checkbox"/> Subsequent Report | <input type="checkbox"/> Alter Casing | <input type="checkbox"/> Fracture Treat | <input type="checkbox"/> Reclamation | <input type="checkbox"/> Well Integrity |
| <input type="checkbox"/> Final Abandonment Notice | <input type="checkbox"/> Casing Repair | <input type="checkbox"/> New Construction | <input type="checkbox"/> Recomplete | <input checked="" type="checkbox"/> Other |
| | <input type="checkbox"/> Change Plans | <input type="checkbox"/> Plug and Abandon | <input type="checkbox"/> Temporarily Abandon | Change to Original PD |
| | <input type="checkbox"/> Convert to Injection | <input type="checkbox"/> Plug Back | <input type="checkbox"/> Water Disposal | |

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

The Clay Basin Unit #66 APD was originally approved on 4/24/2009, for a period of 2 years. At this time Wexpro Company requests the above APD be renewed for an additional 2 years.

CONDITIONS OF APPROVAL ATTACHED

RECEIVED

MAY 02 2011

DIV. OF OIL, GAS & MINING

VERNAL FIELD OFFICE

ENG.

GEOL.

E.S.

PET.

RECL.

| | |
|---|--------------------------|
| 14. I hereby certify that the foregoing is true and correct. | |
| Electronic Submission #104987 verified by the BLM Well Information System For WEXPRO COMPANY, sent to the Vernal Committed to AFMSS for processing by ROBIN R. HANSEN on 03/23/2011 (11RRH1731SE) | |
| Name (Printed/Typed) G T NIMMO | Title OPERATIONS MANAGER |
| Signature (Electronic Submission) | Date 03/22/2011 |

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

| | | |
|---|--|---------------------|
| Approved By <u> </u> | Assistant Field Manager Lands & Mineral Resources | APR 25 2011 |
| Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon. | Office | VERNAL FIELD OFFICE |

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

UDOGM

** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED **

110001731 SE

CONDITIONS OF APPROVAL

Wexpro Company

Notice of Intent APD Extension

Lease: UTSL045051B
Well: Clay Basin Unit 66
Location: NWN Sec 21-T3N-R24E

An extension for the referenced APD is granted with the following conditions:

1. The extension and APD shall expire on 4/24/13.
2. No other extension shall be granted.

If you have any other questions concerning this matter, please contact Carey Doyle of this office at (435) 781-3406

| | | |
|---|--|--|
| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL 045051B |
| 1. TYPE OF WELL Gas Well | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN |
| 3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902 | | 8. WELL NAME and NUMBER: CLAY BASIN U 66 |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | 9. API NUMBER: 43009300670000 |
| 9. FIELD and POOL or WILDCAT: CLAY BASIN | | COUNTY: DAGGETT |
| STATE: UTAH | | |
| 11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA | | |
| TYPE OF SUBMISSION | TYPE OF ACTION | |
| <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: | <input type="checkbox"/> ACIDIZE <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> DEEPEN <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> PLUG BACK <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> APD EXTENSION <input type="checkbox"/> WILDCAT WELL DETERMINATION <input checked="" type="checkbox"/> OTHER | |
| <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 5/31/2011 | OTHER: <input style="width: 100px;" type="text" value="Drilling Activity"/> | |
| <input type="checkbox"/> SPUD REPORT Date of Spud: | | |
| <input type="checkbox"/> DRILLING REPORT Report Date: | | |
| 12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc. The above well was spud on 6/9/09, 60' of 20" conductor was set. On 6/10/09, 440' of surface casing was set. Due to rig schedules and other issues, the drilling of the above well will be completed at a later date. As required, Wexpro will submit a "Drilling Activity Status Report" monthly until the drilling of the well resumes. This report covers from May 1, 2011 to May 31, 2011. | | |
| Accepted by the Utah Division of Oil, Gas and Mining FOR RECORD ONLY | | |
| NAME (PLEASE PRINT) Paul Jibson | | PHONE NUMBER 307 352-7561 |
| SIGNATURE N/A | | TITLE Permit Agent |
| | | DATE 6/1/2011 |

| | | |
|--|--|--|
| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL 045051B |
| 1. TYPE OF WELL Gas Well | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN |
| 3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902 | | 8. WELL NAME and NUMBER: CLAY BASIN U 66 |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | 9. API NUMBER: 43009300670000 |
| 9. FIELD and POOL or WILDCAT: CLAY BASIN | | COUNTY: DAGGETT |
| STATE: UTAH | | |

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | |
|--|---|---|--|
| <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: | <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION | <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION | <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION |
| <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 6/30/2011 | | | |
| <input type="checkbox"/> SPUD REPORT Date of Spud: | | | |
| <input type="checkbox"/> DRILLING REPORT Report Date: | | | |
| | OTHER: <input style="width: 100px;" type="text" value="Drilling Activity"/> | | |

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

The above well was spud on 6/9/09, 60' of 20" conductor was set. On 6/10/09, 440' of surface casing was set. Due to rig schedules and other issues, the drilling of the above well will be completed at a later date. As required, Wexpro will submit a "Drilling Activity Status Report" monthly until the drilling of the well resumes. This report covers from June 1, 2011 to July 30, 2011.

Accepted by the
 Utah Division of
 Oil, Gas and Mining
FOR RECORD ONLY

| | | |
|---|-------------------------------------|------------------------------|
| NAME (PLEASE PRINT) Paul Jibson | PHONE NUMBER 307 352-7561 | TITLE Permit Agent |
| SIGNATURE N/A | DATE 7/1/2011 | |

| | | |
|---|--|--|
| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 |
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| 9. FIELD and POOL or WILDCAT: CLAY BASIN | | COUNTY: DAGGETT |
| STATE: UTAH | | |
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| TYPE OF SUBMISSION | TYPE OF ACTION | |
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| <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 7/31/2011 | OTHER: <input type="text" value="Drilling Activity"/> | |
| <input type="checkbox"/> SPUD REPORT Date of Spud: | | |
| <input type="checkbox"/> DRILLING REPORT Report Date: | | |
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| Accepted by the Utah Division of Oil, Gas and Mining FOR RECORD ONLY | | |
| NAME (PLEASE PRINT) Paul Jibson | PHONE NUMBER 307 352-7561 | TITLE Permit Agent |
| SIGNATURE N/A | DATE 8/3/2011 | |

| | | |
|--|--|--|
| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 |
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| STATE: UTAH | | |

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

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| <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 8/31/2011 | | | |
| <input type="checkbox"/> SPUD REPORT Date of Spud: | | | |
| <input type="checkbox"/> DRILLING REPORT Report Date: | | | |

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

The above well was spud on 6/9/09, 60' of 20" conductor was set. On 6/10/09, 440' of surface casing was set. Due to rig schedules and other issues, the drilling of the above well will be completed at a later date. As required, Wexpro will submit a "Drilling Activity Status Report" monthly until the drilling of the well resumes. This report covers from August 1, 2011 to August 31, 2011.

Accepted by the
 Utah Division of
 Oil, Gas and Mining
FOR RECORD ONLY

| | | |
|---|-------------------------------------|------------------------------|
| NAME (PLEASE PRINT) Paul Jibson | PHONE NUMBER 307 352-7561 | TITLE Permit Agent |
| SIGNATURE N/A | DATE 9/1/2011 | |

| | | |
|--|--|--|
| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 |
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| STATE: UTAH | | |

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | |
|--|---|---|--|
| <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: | <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION | <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION | <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION |
| <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 9/30/2011 | | | |
| <input type="checkbox"/> SPUD REPORT Date of Spud: | | | |
| <input type="checkbox"/> DRILLING REPORT Report Date: | | | |
| | OTHER: <input style="width: 100px;" type="text" value="Drilling Activity"/> | | |

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

The above well was spud on 6/9/09, 60' of 20" conductor was set. On 6/10/09, 440' of surface casing was set. Due to rig schedules and other issues, the drilling of the above well will be completed at a later date. As required, Wexpro will submit a "Drilling Activity Status Report" monthly until the drilling of the well resumes. This report covers from September 1, 2010 to September 30, 2011.

Accepted by the
 Utah Division of
 Oil, Gas and Mining
FOR RECORD ONLY

| | | |
|---|-------------------------------------|------------------------------|
| NAME (PLEASE PRINT) Paul Jibson | PHONE NUMBER 307 352-7561 | TITLE Permit Agent |
| SIGNATURE N/A | DATE 10/3/2011 | |

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|---|--|--|
| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL 045051B |
| 1. TYPE OF WELL Gas Well | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN |
| 3. ADDRESS OF OPERATOR: P.O. Box 458, Rock Springs, WY, 82902 | | 8. WELL NAME and NUMBER: CLAY BASIN U 66 |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | 9. API NUMBER: 43009300670000 |
| 9. FIELD and POOL or WILDCAT: CLAY BASIN | | COUNTY: DAGGETT |
| STATE: UTAH | | |
| 11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA | | |
| TYPE OF SUBMISSION | TYPE OF ACTION | |
| <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: | <input type="checkbox"/> ACIDIZE <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> DEEPEN <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> PLUG BACK <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> APD EXTENSION <input type="checkbox"/> WILDCAT WELL DETERMINATION <input checked="" type="checkbox"/> OTHER | |
| <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 10/31/2011 | OTHER: <input type="text" value="Drilling Activity"/> | |
| <input type="checkbox"/> SPUD REPORT Date of Spud: | | |
| <input type="checkbox"/> DRILLING REPORT Report Date: | | |
| 12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc. The above well was spud on 6/9/09, 60' of 20" conductor was set. On 6/10/09, 440' of surface casing was set. Due to rig schedules and other issues, the drilling of the above well will be completed at a later date. As required, Wexpro will submit a "Drilling Activity Status Report" monthly until the drilling of the well resumes. This report covers from October 1, 2011 to October 31, 2011. | | |
| Accepted by the Utah Division of Oil, Gas and Mining FOR RECORD ONLY | | |
| NAME (PLEASE PRINT) Paul Jibson | PHONE NUMBER 307 352-7561 | TITLE Permit Agent |
| SIGNATURE N/A | DATE 11/4/2011 | |

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|---|--|--|
| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL 045051B |
| 1. TYPE OF WELL Gas Well | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN |
| 3. ADDRESS OF OPERATOR: P.O. Box 458, Rock Springs, WY, 82902 | | 8. WELL NAME and NUMBER: CLAY BASIN U 66 |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | 9. API NUMBER: 43009300670000 |
| 9. FIELD and POOL or WILDCAT: CLAY BASIN | | COUNTY: DAGGETT |
| STATE: UTAH | | |
| 11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA | | |
| TYPE OF SUBMISSION | TYPE OF ACTION | |
| <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: | <input type="checkbox"/> ACIDIZE <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> DEEPEN <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> PLUG BACK <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> APD EXTENSION <input type="checkbox"/> WILDCAT WELL DETERMINATION <input checked="" type="checkbox"/> OTHER | |
| <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 10/31/2011 | OTHER: <input type="text" value="Drilling Activity"/> | |
| <input type="checkbox"/> SPUD REPORT Date of Spud: | | |
| <input type="checkbox"/> DRILLING REPORT Report Date: | | |
| 12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc. The above well was spud on 6/9/09, 60' of 20" conductor was set. On 6/10/09, 440' of surface casing was set. Due to rig schedules and other issues, the drilling of the above well will be completed at a later date. As required, Wexpro will submit a "Drilling Activity Status Report" monthly until the drilling of the well resumes. This report covers from October 1, 2011 to October 31, 2011. | | |
| Accepted by the Utah Division of Oil, Gas and Mining FOR RECORD ONLY | | |
| NAME (PLEASE PRINT) Paul Jibson | PHONE NUMBER 307 352-7561 | TITLE Permit Agent |
| SIGNATURE N/A | DATE 11/4/2011 | |

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|--|--|--|
| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL 045051B |
| 1. TYPE OF WELL Gas Well | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN |
| 3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902 | | 8. WELL NAME and NUMBER: CLAY BASIN U 66 |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | 9. API NUMBER: 43009300670000 |
| 9. FIELD and POOL or WILDCAT: CLAY BASIN | | COUNTY: DAGGETT |
| STATE: UTAH | | |

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | |
|---|---|--|---|
| <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: | <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION | <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input checked="" type="checkbox"/> OTHER | <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: <input style="width: 100px;" type="text" value="Drilling Activity"/> |
| <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 11/30/2011 | | | |
| <input type="checkbox"/> SPUD REPORT Date of Spud: | | | |
| <input type="checkbox"/> DRILLING REPORT Report Date: | | | |

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

The above well was spud on 6/9/09, 60' of 20" conductor was set. On 6/10/09, 440' of surface casing was set. Due to rig schedules and other issues, the drilling of the above well will be completed at a later date. As required, Wexpro will submit a "Drilling Activity Status Report" monthly until the drilling of the well resumes. This report covers from November 1, 2010, to November 30, 2011.

Accepted by the
 Utah Division of
 Oil, Gas and Mining
FOR RECORD ONLY

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|---|-------------------------------------|------------------------------|
| NAME (PLEASE PRINT) Paul Jibson | PHONE NUMBER 307 352-7561 | TITLE Permit Agent |
| SIGNATURE N/A | DATE 12/2/2011 | |

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| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL 045051B |
| 1. TYPE OF WELL Gas Well | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN |
| 3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902 | | 8. WELL NAME and NUMBER: CLAY BASIN U 66 |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | 9. API NUMBER: 43009300670000 |
| 9. FIELD and POOL or WILDCAT: CLAY BASIN | | COUNTY: DAGGETT |
| STATE: UTAH | | |

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | |
|---|---|---|--|
| <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: | <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION | <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION | <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION |
| <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 12/31/2011 | <input checked="" type="checkbox"/> OTHER | | |
| <input type="checkbox"/> SPUD REPORT Date of Spud: | OTHER: <input style="width: 100px;" type="text" value="Drilling Activity"/> | | |
| <input type="checkbox"/> DRILLING REPORT Report Date: | | | |

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

The above well was spud on 6/9/09, 60' of 20" conductor was set. On 6/10/09, 440' of surface casing was set. Due to rig schedules and other issues, the drilling of the above well will be completed at a later date. As required, Wexpro will submit a "Drilling Activity Status Report" monthly until the drilling of the well resumes. This report covers from December 1, 2011 to December 31, 2011.

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|---|-------------------------------------|------------------------------|
| NAME (PLEASE PRINT) Paul Jibson | PHONE NUMBER 307 352-7561 | TITLE Permit Agent |
| SIGNATURE N/A | DATE 1/3/2012 | |

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| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL 045051B |
| | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: |
| 1. TYPE OF WELL Gas Well | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | | 8. WELL NAME and NUMBER: CLAY BASIN U 66 |
| 3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902 | | 9. API NUMBER: 43009300670000 |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | 9. FIELD and POOL or WILDCAT: CLAY BASIN |
| | | COUNTY: DAGGETT |
| | | STATE: UTAH |

11.

CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | |
|--|---|--|---|
| <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: | <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION | <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input checked="" type="checkbox"/> OTHER | <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: <input type="text" value="Drilling Activity"/> |
| <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 1/31/2012 | | | |
| <input type="checkbox"/> SPUD REPORT Date of Spud: | | | |
| <input type="checkbox"/> DRILLING REPORT Report Date: | | | |

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

The above well was spud on 6/9/09, 60' of 20" conductor was set. On 6/10/09, 440' of surface casing was set. Due to rig schedules and other issues, the drilling of the above well will be completed at a later date.

As required, Wexpro will submit a "Drilling Activity Status Report" monthly until the drilling of the well resumes. This report covers from January 1, 2012 to January 31, 2012.

Accepted by the
Utah Division of
Oil, Gas and Mining
FOR RECORD ONLY
 February 02, 2012

| | | |
|---|-------------------------------------|------------------------------|
| NAME (PLEASE PRINT) Paul Jibson | PHONE NUMBER 307 352-7561 | TITLE Permit Agent |
| SIGNATURE N/A | | DATE 2/2/2012 |

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|---|---|--|
| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL 045051B |
| 1. TYPE OF WELL Gas Well | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN |
| 3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902 | | 8. WELL NAME and NUMBER: CLAY BASIN U 66 |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | 9. API NUMBER: 43009300670000 |
| PHONE NUMBER: 307 922-5612 Ext | | 9. FIELD and POOL or WILDCAT: CLAY BASIN |
| COUNTY: DAGGETT | | STATE: UTAH |
| 11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA | | |
| TYPE OF SUBMISSION | TYPE OF ACTION | |
| <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: | <input type="checkbox"/> ACIDIZE | |
| <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 2/29/2012 | <input type="checkbox"/> ALTER CASING | |
| <input type="checkbox"/> SPUD REPORT Date of Spud: | <input type="checkbox"/> CASING REPAIR | |
| <input type="checkbox"/> DRILLING REPORT Report Date: | <input type="checkbox"/> CHANGE TO PREVIOUS PLANS | |
| | <input type="checkbox"/> CHANGE WELL STATUS | |
| | <input type="checkbox"/> CHANGE TUBING | |
| | <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS | |
| | <input type="checkbox"/> DEEPEN | |
| | <input type="checkbox"/> FRACTURE TREAT | |
| | <input type="checkbox"/> NEW CONSTRUCTION | |
| | <input type="checkbox"/> OPERATOR CHANGE | |
| | <input type="checkbox"/> PLUG AND ABANDON | |
| | <input type="checkbox"/> PLUG BACK | |
| | <input type="checkbox"/> PRODUCTION START OR RESUME | |
| | <input type="checkbox"/> RECLAMATION OF WELL SITE | |
| | <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION | |
| | <input type="checkbox"/> REPERFORATE CURRENT FORMATION | |
| | <input type="checkbox"/> SIDETRACK TO REPAIR WELL | |
| | <input type="checkbox"/> TEMPORARY ABANDON | |
| | <input type="checkbox"/> TUBING REPAIR | |
| | <input type="checkbox"/> VENT OR FLARE | |
| | <input type="checkbox"/> WATER DISPOSAL | |
| | <input type="checkbox"/> WATER SHUTOFF | |
| | <input type="checkbox"/> SI TA STATUS EXTENSION | |
| | <input type="checkbox"/> WILDCAT WELL DETERMINATION | |
| | <input checked="" type="checkbox"/> OTHER | |
| | OTHER: <input type="text" value="Drilling Activity"/> | |
| 12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc. The above well was spud on 6/9/09, 60' of 20" conductor was set. On 6/10/09, 440' of surface casing was set. Due to rig schedules and other issues, the drilling of the above well will be completed at a later date. As required, Wexpro will submit a "Drilling Activity Status Report" monthly until the drilling of the well resumes. This report covers from February 1, 2012 to February 29, 2012. | | |
| Accepted by the Utah Division of Oil, Gas and Mining FOR RECORD ONLY March 14, 2012 | | |
| NAME (PLEASE PRINT) Paul Jibson | PHONE NUMBER 307 352-7561 | TITLE Permit Agent |
| SIGNATURE N/A | DATE 3/8/2012 | |

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| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL 045051B |
| 1. TYPE OF WELL Gas Well | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN |
| 3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902 | | 8. WELL NAME and NUMBER: CLAY BASIN U 66 |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | 9. API NUMBER: 43009300670000 |
| PHONE NUMBER: 307 922-5612 Ext | | 9. FIELD and POOL or WILDCAT: CLAY BASIN |
| COUNTY: DAGGETT | | STATE: UTAH |

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | | |
|--|---|---|--|--|
| <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: | <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION | <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION | <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION | <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 3/31/2012 <input type="checkbox"/> SPUD REPORT Date of Spud: <input type="checkbox"/> DRILLING REPORT Report Date: |
| OTHER: <input style="width: 100px;" type="text" value="Drilling Activity"/> | | | | |

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

The above well was spud on 6/9/09, 60' of 20" conductor was set. On 6/10/09, 440' of surface casing was set. Due to rig schedules and other issues, the drilling of the above well will be completed at a later date. As required, Wexpro will submit a "Drilling Activity Status Report" monthly until the drilling of the well resumes. This report covers from March 1, 2012 to March 31, 2012.

**Accepted by the
Utah Division of
Oil, Gas and Mining**

FOR RECORD ONLY

April 12, 2012

| | | |
|---|-------------------------------------|------------------------------|
| NAME (PLEASE PRINT) Paul Jibson | PHONE NUMBER 307 352-7561 | TITLE Permit Agent |
| SIGNATURE N/A | DATE 4/3/2012 | |

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|--|--|--|
| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL 045051B |
| 1. TYPE OF WELL Gas Well | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN |
| 3. ADDRESS OF OPERATOR: P.O. Box 458, Rock Springs, WY, 82902 | | 8. WELL NAME and NUMBER: CLAY BASIN U 66 |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | 9. API NUMBER: 43009300670000 |
| PHONE NUMBER: 307 922-5612 Ext | | 9. FIELD and POOL or WILDCAT: CLAY BASIN |
| COUNTY: DAGGETT | | STATE: UTAH |

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | | |
|--|---|---|--|--|
| <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: | <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION | <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION | <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION | <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 4/30/2012 <input type="checkbox"/> SPUD REPORT Date of Spud: <input type="checkbox"/> DRILLING REPORT Report Date: |
| OTHER: <input style="width: 100px;" type="text" value="Drilling Activity"/> | | | | |

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

The above well was spud on 6/9/09, 60' of 20" conductor was set. On 6/10/09, 440' of surface casing was set. Due to rig schedules and other issues, the drilling of the above well will be completed at a later date. As required, Wexpro will submit a "Drilling Activity Status Report" monthly until the drilling of the well resumes. This report covers from April 1, 2012 to April 30, 2012.

**Accepted by the
Utah Division of
Oil, Gas and Mining**

FOR RECORD ONLY

May 04, 2012

| | | |
|---|-------------------------------------|------------------------------|
| NAME (PLEASE PRINT) Paul Jibson | PHONE NUMBER 307 352-7561 | TITLE Permit Agent |
| SIGNATURE N/A | DATE 5/1/2012 | |

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| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL 045051B |
| | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: |
| | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN |
| | | 8. WELL NAME and NUMBER: CLAY BASIN U 66 |
| 1. TYPE OF WELL Gas Well | | 9. API NUMBER: 43009300670000 |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | | 9. FIELD and POOL or WILDCAT: CLAY BASIN |
| 3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902 | | 9. FIELD and POOL or WILDCAT: CLAY BASIN |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | COUNTY: DAGGETT |
| | | STATE: UTAH |

11.

CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | |
|--|---|--|---|
| <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: | <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION | <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input checked="" type="checkbox"/> OTHER | <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: <input type="text" value="Drilling Activity"/> |
| <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 5/31/2012 | | | |
| <input type="checkbox"/> SPUD REPORT Date of Spud: | | | |
| <input type="checkbox"/> DRILLING REPORT Report Date: | | | |

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

The above well was spud on 6/9/09, 60' of 20" conductor was set. On 6/10/09, 440' of surface casing was set. Due to rig schedules and other issues, the drilling of the above well will be completed at a later date.

As required, Wexpro will submit a "Drilling Activity Status Report" monthly until the drilling of the well resumes. This report covers from May 1, 2012 to May 31, 2012.

Accepted by the
Utah Division of
Oil, Gas and Mining
FOR RECORD ONLY
 June 11, 2012

| | | |
|---|-------------------------------------|------------------------------|
| NAME (PLEASE PRINT) Paul Jibson | PHONE NUMBER 307 352-7561 | TITLE Permit Agent |
| SIGNATURE N/A | | DATE 6/8/2012 |

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| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL 045051B |
| 1. TYPE OF WELL Gas Well | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN |
| 3. ADDRESS OF OPERATOR: P.O. Box 458, Rock Springs, WY, 82902 | | 8. WELL NAME and NUMBER: CLAY BASIN U 66 |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | 9. API NUMBER: 43009300670000 |
| PHONE NUMBER: 307 922-5612 Ext | | 9. FIELD and POOL or WILDCAT: CLAY BASIN |
| COUNTY: DAGGETT | | STATE: UTAH |

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | | |
|--|---|---|--|--|
| <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: | <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION | <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION | <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION | <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 6/30/2012 <input type="checkbox"/> SPUD REPORT Date of Spud: <input type="checkbox"/> DRILLING REPORT Report Date: |
| OTHER: <input style="width: 100px;" type="text" value="Drilling Activity"/> | | | | |

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

The above well was spud on 6/9/09, 60' of 20" conductor was set. On 6/10/09, 440' of surface casing was set. Due to rig schedules and other issues, the drilling of the above well will be completed at a later date. As required, Wexpro will submit a "Drilling Activity Status Report" monthly until the drilling of the well resumes. This report covers from June 1, 2012 to June 30, 2012.

**Accepted by the
Utah Division of
Oil, Gas and Mining**

FOR RECORD ONLY

July 05, 2012

| | | |
|---|-------------------------------------|------------------------------|
| NAME (PLEASE PRINT) Paul Jibson | PHONE NUMBER 307 352-7561 | TITLE Permit Agent |
| SIGNATURE N/A | DATE 7/3/2012 | |

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|---|--|--|
| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL 045051B |
| 1. TYPE OF WELL Gas Well | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN |
| 3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902 | | 8. WELL NAME and NUMBER: CLAY BASIN U 66 |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | 9. API NUMBER: 43009300670000 |
| PHONE NUMBER: 307 922-5612 Ext | | 9. FIELD and POOL or WILDCAT: CLAY BASIN |
| COUNTY: DAGGETT | | STATE: UTAH |
| 11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA | | |
| TYPE OF SUBMISSION | TYPE OF ACTION | |
| <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: | <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION | |
| <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 7/31/2012 | <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input checked="" type="checkbox"/> OTHER | |
| <input type="checkbox"/> SPUD REPORT Date of Spud: | <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION | |
| <input type="checkbox"/> DRILLING REPORT Report Date: | OTHER: <input type="text" value="Drilling Activity"/> | |
| 12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc. The above well was spud on 6/9/09, 60' of 20" conductor was set. On 6/10/09, 440' of surface casing was set. Due to rig schedules and other issues, the drilling of the above well will be completed at a later date. As required, Wexpro will submit a "Drilling Activity Status Report" monthly until the drilling of the well resumes. This report covers from July 1, 2012 to July 31, 2012. | | |
| Accepted by the Utah Division of Oil, Gas and Mining FOR RECORD ONLY August 14, 2012 | | |
| NAME (PLEASE PRINT) Paul Jibson | PHONE NUMBER 307 352-7561 | TITLE Permit Agent |
| SIGNATURE N/A | DATE 8/9/2012 | |

| | | |
|--|--|--|
| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL 045051B |
| 1. TYPE OF WELL Gas Well | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN |
| 3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902 | | 8. WELL NAME and NUMBER: CLAY BASIN U 66 |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | 9. API NUMBER: 43009300670000 |
| PHONE NUMBER: 307 922-5612 Ext | | 9. FIELD and POOL or WILDCAT: CLAY BASIN |
| COUNTY: DAGGETT | | STATE: UTAH |

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | | |
|--|---|---|--|--|
| <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: | <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION | <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION | <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION | <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 8/31/2012 <input type="checkbox"/> SPUD REPORT Date of Spud: <input type="checkbox"/> DRILLING REPORT Report Date: |
| OTHER: <input style="width: 100px;" type="text" value="Drilling Activity"/> | | | | |

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

The above well was spud on 6/9/09, 60' of 20" conductor was set. On 6/10/09, 440' of surface casing was set. Due to rig schedules and other issues, the drilling of the above well will be completed at a later date. As required, Wexpro will submit a "Drilling Activity Status Report" monthly until the drilling of the well resumes. This report covers from August 1, 2012 to August 31, 2012.

**Accepted by the
Utah Division of
Oil, Gas and Mining**

FOR RECORD ONLY

September 17, 2012

| | | |
|---|-------------------------------------|------------------------------|
| NAME (PLEASE PRINT) Paul Jibson | PHONE NUMBER 307 352-7561 | TITLE Permit Agent |
| SIGNATURE N/A | DATE 9/17/2012 | |

| | | |
|--|--|--|
| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL 045051B |
| 1. TYPE OF WELL Gas Well | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN |
| 3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902 | | 8. WELL NAME and NUMBER: CLAY BASIN U 66 |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | 9. API NUMBER: 43009300670000 |
| PHONE NUMBER: 307 922-5612 Ext | | 9. FIELD and POOL or WILDCAT: CLAY BASIN |
| COUNTY: DAGGETT | | STATE: UTAH |

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | | |
|--|---|---|--|--|
| <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: | <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION | <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION | <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION | <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 9/30/2012 <input type="checkbox"/> SPUD REPORT Date of Spud: <input type="checkbox"/> DRILLING REPORT Report Date: |
| OTHER: <input style="width: 100px;" type="text" value="Drilling Activity"/> | | | | |

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

The above well was spud on 6/9/09, 60' of 20" conductor was set. On 6/10/09, 440' of surface casing was set. Due to rig schedules and other issues, the drilling of the above well will be completed at a later date. As required, Wexpro will submit a "Drilling Activity Status Report" monthly until the drilling of the well resumes. This report covers from September 1, 2012 to September 30, 2012.

**Accepted by the
Utah Division of
Oil, Gas and Mining**

FOR RECORD ONLY

October 02, 2012

| | | |
|---|-------------------------------------|------------------------------|
| NAME (PLEASE PRINT) Paul Jibson | PHONE NUMBER 307 352-7561 | TITLE Permit Agent |
| SIGNATURE N/A | DATE 10/1/2012 | |

| | | |
|---|--|--|
| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL 045051B |
| 1. TYPE OF WELL Gas Well | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN |
| 3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902 | | 8. WELL NAME and NUMBER: CLAY BASIN U 66 |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | 9. API NUMBER: 43009300670000 |
| PHONE NUMBER: 307 922-5612 Ext | | 9. FIELD and POOL or WILDCAT: CLAY BASIN |
| COUNTY: DAGGETT | | STATE: UTAH |
| 11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA | | |
| TYPE OF SUBMISSION | TYPE OF ACTION | |
| <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: | <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION | |
| <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 10/31/2012 | <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input checked="" type="checkbox"/> OTHER | |
| <input type="checkbox"/> SPUD REPORT Date of Spud: | <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION | |
| <input type="checkbox"/> DRILLING REPORT Report Date: | OTHER: <input type="text" value="Drilling Activity"/> | |
| 12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc. <p>The above well was spud on 6/9/09, 60' of 20" conductor was set. On 6/10/09, 440' of surface casing was set. Due to rig schedules and other issues, the drilling of the above well will be completed at a later date. As required, Wexpro will submit a "Drilling Activity Status Report" monthly until the drilling of the well resumes. This report covers from October 1, 2012 to October 31, 2012.</p> | | |
| Accepted by the Utah Division of Oil, Gas and Mining FOR RECORD ONLY November 21, 2012 | | |
| NAME (PLEASE PRINT) Paul Jibson | PHONE NUMBER 307 352-7561 | TITLE Permit Agent |
| SIGNATURE N/A | DATE 11/20/2012 | |

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|---|---|--|
| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL 045051B |
| 1. TYPE OF WELL Gas Well | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN |
| 3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902 | | 8. WELL NAME and NUMBER: CLAY BASIN U 66 |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | 9. API NUMBER: 43009300670000 |
| PHONE NUMBER: 307 922-5612 Ext | | 9. FIELD and POOL or WILDCAT: CLAY BASIN |
| COUNTY: DAGGETT | | STATE: UTAH |
| 11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA | | |
| TYPE OF SUBMISSION | TYPE OF ACTION | |
| <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: | <input type="checkbox"/> ACIDIZE | |
| <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 11/30/2012 | <input type="checkbox"/> ALTER CASING | |
| <input type="checkbox"/> SPUD REPORT Date of Spud: | <input type="checkbox"/> CASING REPAIR | |
| <input type="checkbox"/> DRILLING REPORT Report Date: | <input type="checkbox"/> CHANGE TO PREVIOUS PLANS | |
| | <input type="checkbox"/> CHANGE WELL STATUS | |
| | <input type="checkbox"/> CHANGE TUBING | |
| | <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS | |
| | <input type="checkbox"/> DEEPEN | |
| | <input type="checkbox"/> FRACTURE TREAT | |
| | <input type="checkbox"/> NEW CONSTRUCTION | |
| | <input type="checkbox"/> OPERATOR CHANGE | |
| | <input type="checkbox"/> PLUG AND ABANDON | |
| | <input type="checkbox"/> PLUG BACK | |
| | <input type="checkbox"/> PRODUCTION START OR RESUME | |
| | <input type="checkbox"/> RECLAMATION OF WELL SITE | |
| | <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION | |
| | <input type="checkbox"/> REPERFORATE CURRENT FORMATION | |
| | <input type="checkbox"/> SIDETRACK TO REPAIR WELL | |
| | <input type="checkbox"/> TEMPORARY ABANDON | |
| | <input type="checkbox"/> TUBING REPAIR | |
| | <input type="checkbox"/> VENT OR FLARE | |
| | <input type="checkbox"/> WATER DISPOSAL | |
| | <input type="checkbox"/> WATER SHUTOFF | |
| | <input type="checkbox"/> SI TA STATUS EXTENSION | |
| | <input type="checkbox"/> WILDCAT WELL DETERMINATION | |
| | <input checked="" type="checkbox"/> OTHER | |
| | OTHER: <input type="text" value="Drilling Activity"/> | |
| 12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc. The above well was spud on 6/9/09, 60' of 20" conductor was set. On 6/10/09, 440' of surface casing was set. Due to rig schedules and other issues, the drilling of the above well will be completed at a later date. As required, Wexpro will submit a "Drilling Activity Status Report" monthly until the drilling of the well resumes. This report covers from November 1, 2012 to November 30, 2012. | | |
| Accepted by the Utah Division of Oil, Gas and Mining FOR RECORD ONLY December 12, 2012 | | |
| NAME (PLEASE PRINT) Paul Jibson | PHONE NUMBER 307 352-7561 | TITLE Permit Agent |
| SIGNATURE N/A | DATE 12/12/2012 | |

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| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL 045051B |
| 1. TYPE OF WELL Gas Well | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN |
| 3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902 | | 8. WELL NAME and NUMBER: CLAY BASIN U 66 |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | 9. API NUMBER: 43009300670000 |
| PHONE NUMBER: 307 922-5612 Ext | | 9. FIELD and POOL or WILDCAT: CLAY BASIN |
| COUNTY: DAGGETT | | STATE: UTAH |

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | | |
|--|---|---|--|--|
| <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: | <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION | <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION | <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION | <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 12/31/2012 <input type="checkbox"/> SPUD REPORT Date of Spud: <input type="checkbox"/> DRILLING REPORT Report Date: |
| OTHER: <input style="width: 100px;" type="text" value="Drilling Activity"/> | | | | |

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

The above well was spud on 6/9/09, 60' of 20" conductor was set. On 6/10/09, 440' of surface casing was set. Due to rig schedules and other issues, the drilling of the above well will be completed at a later date. As required, Wexpro will submit a "Drilling Activity Status Report" monthly until the drilling of the well resumes. This report covers from December 1, 2012 to December 31, 2012.

**Accepted by the
Utah Division of
Oil, Gas and Mining**

FOR RECORD ONLY

January 30, 2013

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|---|-------------------------------------|------------------------------|
| NAME (PLEASE PRINT) Paul Jibson | PHONE NUMBER 307 352-7561 | TITLE Permit Agent |
| SIGNATURE N/A | DATE 1/3/2013 | |

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| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL 045051B |
| 1. TYPE OF WELL Gas Well | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN |
| 3. ADDRESS OF OPERATOR: P.O. Box 458, Rock Springs, WY, 82902 | | 8. WELL NAME and NUMBER: CLAY BASIN U 66 |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | 9. API NUMBER: 43009300670000 |
| PHONE NUMBER: 307 922-5612 Ext | | 9. FIELD and POOL or WILDCAT: CLAY BASIN |
| COUNTY: DAGGETT | | STATE: UTAH |

11.

CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION |
|---|---|
| <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: | <input type="checkbox"/> ACIDIZE <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> DEEPEN <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> PLUG BACK <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> WILDCAT WELL DETERMINATION <input checked="" type="checkbox"/> OTHER |
| <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 1/31/2013 | OTHER: <input style="width: 100px;" type="text" value="Drilling Activity"/> |
| <input type="checkbox"/> SPUD REPORT Date of Spud: | |
| <input type="checkbox"/> DRILLING REPORT Report Date: | |

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

The above well was spud on 6/9/09, 60' of 20" conductor was set. On 6/10/09, 440' of surface casing was set. Due to rig schedules and other issues, the drilling of the above well will be completed at a later date.

As required, Wexpro will submit a "Drilling Activity Status Report" monthly until the drilling of the well resumes. This report covers from January 1, 2013 to January 31, 2013.

Accepted by the
Utah Division of
Oil, Gas and Mining
FOR RECORD ONLY
 February 13, 2013

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| NAME (PLEASE PRINT) Paul Jibson | PHONE NUMBER 307 352-7561 | TITLE Permit Agent |
| SIGNATURE N/A | DATE 2/8/2013 | |

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| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL 045051B |
| 1. TYPE OF WELL Gas Well | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN |
| 3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902 | | 8. WELL NAME and NUMBER: CLAY BASIN U 66 |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | 9. API NUMBER: 43009300670000 |
| PHONE NUMBER: 307 922-5612 Ext | | 9. FIELD and POOL or WILDCAT: CLAY BASIN |
| COUNTY: DAGGETT | | STATE: UTAH |
| 11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA | | |
| TYPE OF SUBMISSION | TYPE OF ACTION | |
| <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: | <input type="checkbox"/> ACIDIZE <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> DEEPEN <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> PLUG BACK <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> WILDCAT WELL DETERMINATION | |
| <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 2/28/2013 | <input checked="" type="checkbox"/> OTHER | |
| <input type="checkbox"/> SPUD REPORT Date of Spud: | OTHER: <input type="text" value="Drilling Activity"/> | |
| <input type="checkbox"/> DRILLING REPORT Report Date: | | |
| 12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc. The above well was spud on 6/9/09, 60' of 20" conductor was set. On 6/10/09, 440' of surface casing was set. Due to rig schedules and other issues, the drilling of the above well will be completed at a later date. As required, Wexpro will submit a "Drilling Activity Status Report" monthly until the drilling of the well resumes. This report covers from February 1, 2013 to February 28, 2013. | | |
| Accepted by the Utah Division of Oil, Gas and Mining FOR RECORD ONLY March 22, 2013 | | |
| NAME (PLEASE PRINT) Paul Jibson | PHONE NUMBER 307 352-7561 | TITLE Permit Agent |
| SIGNATURE N/A | DATE 3/7/2013 | |

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|--|--|---|
| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL 045051B |
| | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: |
| | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN |
| | | 8. WELL NAME and NUMBER: CLAY BASIN U 66 |
| 1. TYPE OF WELL Gas Well | | 9. API NUMBER: 43009300670000 |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | | 9. FIELD and POOL or WILDCAT: CLAY BASIN |
| 3. ADDRESS OF OPERATOR: P.O. Box 458, Rock Springs, WY, 82902 | | 9. COUNTY: DAGGETT |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | STATE: UTAH |
| 5. PHONE NUMBER: 307 922-5612 Ext | | |

11.

CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | | |
|--|---|--|--|---|
| <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: | <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION | <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input checked="" type="checkbox"/> OTHER | <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION | OTHER: <input type="text" value="Drilling Activity"/> |
| <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 3/31/2013 | | | | |
| <input type="checkbox"/> SPUD REPORT Date of Spud: | | | | |
| <input type="checkbox"/> DRILLING REPORT Report Date: | | | | |

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

The above well was spud on 6/9/09, 60' of 20" conductor was set. On 6/10/09, 440' of surface casing was set. Due to rig schedules and other issues, the drilling of the above well will be completed at a later date.

As required, Wexpro will submit a "Drilling Activity Status Report" monthly until the drilling of the well resumes. This report covers from March 1, 2013 to March 31, 2013.

Accepted by the
Utah Division of
Oil, Gas and Mining
FOR RECORD ONLY
 April 19, 2013

| | | |
|------------------------------------|------------------------------|-----------------------|
| NAME (PLEASE PRINT) Paul Jibson | PHONE NUMBER 307 352-7561 | TITLE Permit Agent |
| SIGNATURE N/A | | DATE 4/17/2013 |

| | | |
|--|--|--|
| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL 045051B |
| 1. TYPE OF WELL Gas Well | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN |
| 3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902 | | 8. WELL NAME and NUMBER: CLAY BASIN U 66 |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | 9. API NUMBER: 43009300670000 |
| PHONE NUMBER: 307 922-5612 Ext | | 9. FIELD and POOL or WILDCAT: CLAY BASIN |
| COUNTY: DAGGETT | | STATE: UTAH |

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | | |
|--|---|---|--|--|
| <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: | <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION | <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION | <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION | <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 4/30/2013 <input type="checkbox"/> SPUD REPORT Date of Spud: <input type="checkbox"/> DRILLING REPORT Report Date: |
| OTHER: <input style="width: 100px;" type="text" value="Drilling Activity"/> | | | | |

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

The above well was spud on 6/9/09, 60' of 20" conductor was set. On 6/10/09, 440' of surface casing was set. Due to rig schedules and other issues, the drilling of the above well will be completed at a later date. As required, Wexpro will submit a "Drilling Activity Status Report" monthly until the drilling of the well resumes. This report covers from April 1, 2013 to April 30, 2013.

**Accepted by the
Utah Division of
Oil, Gas and Mining**
FOR RECORD ONLY
 May 09, 2013

| | | |
|---|-------------------------------------|------------------------------|
| NAME (PLEASE PRINT) Paul Jibson | PHONE NUMBER 307 352-7561 | TITLE Permit Agent |
| SIGNATURE N/A | DATE 5/9/2013 | |

| | | |
|---|--|--|
| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL 045051B |
| 1. TYPE OF WELL Gas Well | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN |
| 3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902 | | 8. WELL NAME and NUMBER: CLAY BASIN U 66 |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | 9. API NUMBER: 43009300670000 |
| PHONE NUMBER: 307 922-5612 Ext | | 9. FIELD and POOL or WILDCAT: CLAY BASIN |
| COUNTY: DAGGETT | | STATE: UTAH |
| 11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA | | |
| TYPE OF SUBMISSION | TYPE OF ACTION | |
| <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: | <input type="checkbox"/> ACIDIZE <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> DEEPEN <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> PLUG BACK <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> WILDCAT WELL DETERMINATION | |
| <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 5/31/2013 | <input checked="" type="checkbox"/> OTHER | |
| <input type="checkbox"/> SPUD REPORT Date of Spud: | OTHER: <input type="text" value="Drilling Activity"/> | |
| <input type="checkbox"/> DRILLING REPORT Report Date: | | |
| 12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc. The above well was spud on 6/9/09, 60' of 20" conductor was set. On 6/10/09, 440' of surface casing was set. Due to rig schedules and other issues, the drilling of the above well will be completed at a later date. As required, Wexpro will submit a "Drilling Activity Status Report" monthly until the drilling of the well resumes. This report covers from May 1, 2013 to May 30, 2013. | | |
| Accepted by the Utah Division of Oil, Gas and Mining FOR RECORD ONLY June 06, 2013 | | |
| NAME (PLEASE PRINT) Paul Jibson | PHONE NUMBER 307 352-7561 | TITLE Permit Agent |
| SIGNATURE N/A | DATE 6/6/2013 | |

| | | |
|--|--|--|
| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL 045051B |
| 1. TYPE OF WELL Gas Well | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN |
| 3. ADDRESS OF OPERATOR: P.O. Box 458, Rock Springs, WY, 82902 | | 8. WELL NAME and NUMBER: CLAY BASIN U 66 |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | 9. API NUMBER: 43009300670000 |
| PHONE NUMBER: 307 922-5612 Ext | | 9. FIELD and POOL or WILDCAT: CLAY BASIN |
| COUNTY: DAGGETT | | STATE: UTAH |

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | | |
|--|---|---|--|--|
| <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: | <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION | <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION | <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION | <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 6/30/2013 <input type="checkbox"/> SPUD REPORT Date of Spud: <input type="checkbox"/> DRILLING REPORT Report Date: |
| OTHER: <input style="width: 100px;" type="text" value="Drilling Activity"/> | | | | |

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

The above well was spud on 6/9/09, 60' of 20" conductor was set. On 6/10/09, 440' of surface casing was set. Due to rig schedules and other issues, the drilling of the above well will be completed at a later date. As required, Wexpro will submit a "Drilling Activity Status Report" monthly until the drilling of the well resumes. This report covers from June 1, 2013 to June 30, 2013.

**Accepted by the
Utah Division of
Oil, Gas and Mining**

FOR RECORD ONLY

July 18, 2013

| | | |
|---|-------------------------------------|------------------------------|
| NAME (PLEASE PRINT) Paul Jibson | PHONE NUMBER 307 352-7561 | TITLE Permit Agent |
| SIGNATURE N/A | DATE 7/1/2013 | |

| | | |
|--|--|--|
| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL 045051B |
| | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: |
| 1. TYPE OF WELL Gas Well | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | | 8. WELL NAME and NUMBER: CLAY BASIN U 66 |
| 3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902 | | 9. API NUMBER: 43009300670000 |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | 9. FIELD and POOL or WILDCAT: CLAY BASIN |
| | | COUNTY: DAGGETT |
| | | STATE: UTAH |

11.

CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | | |
|--|---|---|--|--|
| <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: | <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION | <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION | <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION | <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 7/31/2013 <input type="checkbox"/> SPUD REPORT Date of Spud: <input type="checkbox"/> DRILLING REPORT Report Date: |
| | | <input checked="" type="checkbox"/> OTHER | OTHER: <input type="text" value="Drilling Activity"/> | |

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

The above well was spud on 6/9/09, 60' of 20" conductor was set. On 6/10/09, 440' of surface casing was set. Due to rig schedules and other issues, the drilling of the above well will be completed at a later date.

As required, Wexpro will submit a "Drilling Activity Status Report" monthly until the drilling of the well resumes. This report covers from July 1, 2013 to July 31, 2013.

Accepted by the
Utah Division of
Oil, Gas and Mining
FOR RECORD ONLY
 August 30, 2013

| | | |
|---|-------------------------------------|------------------------------|
| NAME (PLEASE PRINT) Paul Jibson | PHONE NUMBER 307 352-7561 | TITLE Permit Agent |
| SIGNATURE N/A | | DATE 8/1/2013 |

| | | |
|--|--|--|
| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL 045051B |
| 1. TYPE OF WELL Gas Well | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN |
| 3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902 | | 8. WELL NAME and NUMBER: CLAY BASIN U 66 |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | 9. API NUMBER: 43009300670000 |
| PHONE NUMBER: 307 922-5612 Ext | | 9. FIELD and POOL or WILDCAT: CLAY BASIN |
| COUNTY: DAGGETT | | STATE: UTAH |

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | | |
|--|---|---|--|--|
| <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: | <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION | <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION | <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION | <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 8/31/2013 <input type="checkbox"/> SPUD REPORT Date of Spud: <input type="checkbox"/> DRILLING REPORT Report Date: |
| OTHER: <input style="width: 100px;" type="text" value="Drilling Activity"/> | | | | |

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

The above well was spud on 6/9/09, 60' of 20" conductor was set. On 6/10/09, 440' of surface casing was set. Due to rig schedules and other issues, the drilling of the above well will be completed at a later date. As required, Wexpro will submit a "Drilling Activity Status Report" monthly until the drilling of the well resumes. This report covers from August 1, 2013 to August 31, 2013.

**Accepted by the
Utah Division of
Oil, Gas and Mining**

FOR RECORD ONLY

October 17, 2013

| | | |
|---|-------------------------------------|------------------------------|
| NAME (PLEASE PRINT) Paul Jibson | PHONE NUMBER 307 352-7561 | TITLE Permit Agent |
| SIGNATURE N/A | DATE 9/12/2013 | |

| | | |
|--|--|--|
| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL 045051B |
| 1. TYPE OF WELL Gas Well | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN |
| 3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902 | | 8. WELL NAME and NUMBER: CLAY BASIN U 66 |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | 9. API NUMBER: 43009300670000 |
| PHONE NUMBER: 307 922-5612 Ext | | 9. FIELD and POOL or WILDCAT: CLAY BASIN |
| COUNTY: DAGGETT | | STATE: UTAH |

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | | |
|--|---|---|--|--|
| <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: | <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION | <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION | <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION | <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 9/30/2013 <input type="checkbox"/> SPUD REPORT Date of Spud: <input type="checkbox"/> DRILLING REPORT Report Date: |
| OTHER: <input style="width: 100px;" type="text" value="Drilling Activity"/> | | | | |

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

The above well was spud on 6/9/09, 60' of 20" conductor was set. On 6/10/09, 440' of surface casing was set. Due to rig schedules and other issues, the drilling of the above well will be completed at a later date. As required, Wexpro will submit a "Drilling Activity Status Report" monthly until the drilling of the well resumes. This report covers from September 1, 2013 to September 30, 2013.

**Accepted by the
Utah Division of
Oil, Gas and Mining**

FOR RECORD ONLY

October 02, 2013

| | | |
|---|-------------------------------------|------------------------------|
| NAME (PLEASE PRINT) Paul Jibson | PHONE NUMBER 307 352-7561 | TITLE Permit Agent |
| SIGNATURE N/A | DATE 10/1/2013 | |

| | | | | | |
|--|---|---|--|---|---|
| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 | | | |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL 045051B | | | |
| 1. TYPE OF WELL Gas Well | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: | | | |
| 2. NAME OF OPERATOR: QEP ENERGY COMPANY | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN | | | |
| 3. ADDRESS OF OPERATOR: 11002 East 17500 South, Vernal, Ut, 84078 | | 8. WELL NAME and NUMBER: CLAY BASIN U 66 | | | |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | 9. API NUMBER: 43009300670000 | | | |
| 9. FIELD and POOL or WILDCAT: CLAY BASIN | | COUNTY: DAGGETT | | | |
| STATE: UTAH | | | | | |
| 11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA | | | | | |
| TYPE OF SUBMISSION | TYPE OF ACTION | | | | |
| <input checked="" type="checkbox"/> NOTICE OF INTENT Approximate date work will start: 10/21/2013 <input type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: <input type="checkbox"/> SPUD REPORT Date of Spud: <input type="checkbox"/> DRILLING REPORT Report Date: | <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION </td> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> OTHER </td> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: <input style="width: 100px;" type="text"/> </td> </tr> </table> | | <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION | <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> OTHER | <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: <input style="width: 100px;" type="text"/> |
| <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION | <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> OTHER | <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: <input style="width: 100px;" type="text"/> | | | |
| 12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc. Please see attached sundry and drilling plans. | | | | | |
| Approved by the Utah Division of Oil, Gas and Mining Date: <u>October 22, 2013</u> By: <u><i>Derek Quist</i></u> | | | | | |
| NAME (PLEASE PRINT) Jeffery Trlica | | PHONE NUMBER 303 308-3628 | | | |
| SIGNATURE N/A | | TITLE Permit Agent | | | |
| DATE 10/21/2013 | | | | | |



The Utah Division of Oil, Gas, and Mining

- State of Utah
- Department of Natural Resources

Electronic Permitting System - Sundry Notices

Sundry Conditions of Approval Well Number 43009300670000

H2S contingency plan should be submitted and approved prior to drilling below 5000' or a minimum of 500' before drilling into any potential H2S zones, whichever is sooner.

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS AND MINING

FORM 9

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.

| | | |
|---|--|---|
| 1. TYPE OF WELL OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER _____ | | 5. LEASE DESIGNATION AND SERIAL NUMBER: UTSL045051B |
| 2. NAME OF OPERATOR: QEP Energy Company | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: NA |
| 3. ADDRESS OF OPERATOR: 1050 17th Street, Suite 500 CITY Denver STATE CO ZIP 80265 | | 7. UNIT or CA AGREEMENT NAME: Clay Basin Unit UTU63009B |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154' FSL, 1974' FEL, Lat.: 40.981319, Long.: -109.209703 QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: NWSE 21 T3N R24 N | | 8. WELL NAME and NUMBER: Clay Basin Unit No. 66 9. API NUMBER: 4300930067 10. FIELD AND POOL, OR WILDCAT: Clay Basin |
| | | COUNTY: Daggett STATE: UTAH |

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | |
|--|---|---|--|
| <input checked="" type="checkbox"/> NOTICE OF INTENT (Submit in Duplicate) Approximate date work will start: 10/21/2013 | <input type="checkbox"/> ACIDIZE | <input checked="" type="checkbox"/> DEEPEN | <input type="checkbox"/> REPERFORATE CURRENT FORMATION |
| <input type="checkbox"/> SUBSEQUENT REPORT (Submit Original Form Only) Date of work completion: | <input type="checkbox"/> ALTER CASING | <input type="checkbox"/> FRACTURE TREAT | <input type="checkbox"/> SIDETRACK TO REPAIR WELL |
| | <input type="checkbox"/> CASING REPAIR | <input type="checkbox"/> NEW CONSTRUCTION | <input type="checkbox"/> TEMPORARILY ABANDON |
| | <input type="checkbox"/> CHANGE TO PREVIOUS PLANS | <input type="checkbox"/> OPERATOR CHANGE | <input type="checkbox"/> TUBING REPAIR |
| | <input type="checkbox"/> CHANGE TUBING | <input type="checkbox"/> PLUG AND ABANDON | <input type="checkbox"/> VENT OR FLARE |
| | <input type="checkbox"/> CHANGE WELL NAME | <input type="checkbox"/> PLUG BACK | <input type="checkbox"/> WATER DISPOSAL |
| | <input type="checkbox"/> CHANGE WELL STATUS | <input type="checkbox"/> PRODUCTION (START/RESUME) | <input type="checkbox"/> WATER SHUT-OFF |
| | <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS | <input type="checkbox"/> RECLAMATION OF WELL SITE | <input type="checkbox"/> OTHER: _____ |
| | <input type="checkbox"/> CONVERT WELL TYPE | <input type="checkbox"/> RECOMPLETE - DIFFERENT FORMATION | |

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

QEP Energy Company requests approval to drill and complete this well in the Weber Formation; please see the attached drilling plan. No additional surface disturbance is needed. Location is built and ready for rig.

For technical questions, please contact Chad Anton at (303) 405-6604.

NAME (PLEASE PRINT) Jeffrey Trlica TITLE Permit Agent
SIGNATURE [Signature] DATE 10/21/2013

(This space for State use only)

QEP Energy Company

Clay Basin Unit No 66

Summarized Drilling Procedure

1. Construct location per plat.
2. MIRU drilling rig.
3. NU and test 5M BOPE.
4. Drill out along with 10' of new hole and perform an FIT to 10.0ppg.
5. Drill 8-3/4" hole to 50' below the base of the Frontier.
6. TOOH to run triple combo followed by an RFT log per geologist program.
7. Drill 8-3/4" hole to 6,500'.
8. RIH with 7" 32# L-80 casing. Place centralizers on the first 2 joints then every 3rd joint to 1,000' above the top of the Frontier with one at the surface shoe. Cement same per program.
9. Prior to drill out, run a CBL across the entire intermediate string.
10. Drill out along with 10' of new hole and perform an FIT to 10.0ppg.
11. Drill 6" hole to TD of 9,987.
12. Log well with triple combo. An additional CBL can be run across the intermediate casing at this point if it is determined that the original CBL was not sufficient.
13. RIH with 4-1/2" 13.5# L-80 casing. Place centralizers on the first 2 joints then every 3rd joint to 1,000' above the top of the Weber. Then place centralizers every 3rd joint from 6,500' to 4,500'. Cement same per program.
14. Pressure test casing.
15. ND BOP's and NU remainder of wellhead.
16. RDMO.

ONSHORE OIL & GAS ORDER NO. 1
QEP ENERGY COMPANY
Clay Basin Unit No 66

DRILLING PROGRAM

ONSHORE OIL & GAS ORDER NO. 1
Approval of Operations on Onshore
Federal Oil and Gas Leases

All lease and/or unit operations will be conducted in such a manner that full compliance is made with applicable laws, regulations (43 CFR 3100), Onshore Oil & Gas No. 1, and the approved plan of operations. The operator is fully responsible for the actions of its subcontractors. A copy of these conditions will be furnished to the field representative to insure compliance.

1. **Formation Tops**

The estimated top of important geologic markers are as follows:

| <u>Formation</u> | <u>Depth</u> |
|------------------|--------------|
| Frontier | 5,220' |
| Mowry | 5,430' |
| Dakota | 5,590' |
| Nuggett | 6,680' |
| Weber | 8,850' |
| Morgan | 9,837' |
| TD | 9,987' |

2. **Anticipated Depths of Oil, Gas, Water, and Other Mineral Bearing Zones**

The estimated depths at which the top of the anticipated water, oil, gas, or other mineral bearing formations are expected to be encountered as follows:

| <u>Substance</u> | <u>Formation</u> | <u>Depth</u> |
|------------------|------------------|--------------|
| Gas | Frontier | 5,220' |
| Gas | Dakota* | 5,590' |
| Gas | Weber | 9,837' |

*Dakota formation is a gas producing zone and a gas storage zone

All fresh water and prospectively valuable minerals encountered during drilling will be recorded by depth and adequately protected. All oil and gas shows will be tested to determine commercial potential.

All water shows and water-bearing sands will be reported to the BLM in Vernal, Utah. Copies of State of Utah form OGC-8-X are acceptable. If flows are detected, samples

ONSHORE OIL & GAS ORDER NO. 1
QEP ENERGY COMPANY
Clay Basin Unit No 66

will be submitted to the BLM along with any water analyses conducted. Fresh water will be obtained from Wonsits Valley water right A49-251 (which was filed on May 7, 1964) or Red Wash water right # 49-2153 (which was filed on March 25, 1960) or will be purchased from a private source, State of Utah Order of the State Engineer for Temporary Change Application Number 41-3087 (t39214). It was determined by the Fish and Wildlife Service that any water right number filed before 1989 is not depleting to the Upper Colorado River System, to supply fresh water for drilling purposes. All water resulting from drilling operations will be disposed of at LaPoint Recycle & Storage; Section 12, T5N, R19E, SLBM.

3. Operator's Specification for Pressure Control Equipment

- A. An 11" 5000 psi double ram with blind rams and pipe rams, annular preventer and drilling spool or BOP with 2 side outlets.
- B. All BOP connections subject to pressure shall be flanged, welded or clamped.
- C. Kill line (2" min), 2 choke line valves (3" min), choke line (3" min), 2 kill line valves (2" min) and a check valve, 2 chokes with one remotely controlled from rig floor and a pressure gauge on choke manifold.
- D. Upper and Lower Kelly cock valves with handles and safety valve and subs to fit all drill string connections.
- E. IBOP or float sub available.
- F. Fill up line must be installed above the uppermost preventer.
- G. Ram type preventers and associated equipment shall be tested to approved stack working pressure if isolated by test plug or to 50 percent of internal yield pressure of casing whichever is less. BOP and related equipment shall meet the minimum requirements of Onshore Oil and Gas Order No. 2 for equipment and testing requirements, procedures, etc. for a 5M system and individual components shall be operable as designed.

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QEP ENERGY COMPANY
Clay Basin Unit No 66

4. **Casing Design:**

| Hole Size | Csg. Size | Top (MD) | Bottom (MD) | Wt. | Grade | Thread | Cond. | Expected MW(ppg) |
|-----------|-----------|----------|-------------|-------|-----------|--------|----------|------------------|
| 17 1/2" | 14" | Sfc | 60' | Steel | Conductor | None | Existing | N/A |
| 12-1/4" | 9-5/8" | Sfc | 440' | 36# | J-55 | STC | Existing | N/A |
| 8-3/4" | 7" | Sfc | 6,500' | 32# | L-80 | LTC | New | 9.3 |
| 6" | 4-1/2" | Sfc | 9,987' | 15.1# | L-80 | ULT-SF | New | 9.3 |

| Casing Strengths: | | | | Collapse | Burst | Tensile (min) |
|-------------------|-------|------|--------|------------|------------|---------------|
| 9-5/8" | 36# | J-55 | LTC | 2,020 psi | 3,520 psi | 394,000 lb |
| 7" | 32# | L-80 | LTC | 8,600 psi | 9,050 psi | 661,000 lb |
| 4 1/2" | 15.1# | L-80 | ULT-SF | 11,090 psi | 10,490 psi | 322,000 lb |

Casing Design Factors

*The casing prescribed above meets or exceeds the below listed design factors.

Burst: 1.2

Collapse: 1.125

Tension: 1.8

Maximum anticipated mud weight: 9.3 ppg

Maximum anticipated surface treating pressure: 5,000 psi

5. **Cementing Program**

7" Intermediate Casing:

Lead Slurry: Surface (TOC) – 4,800'. 513 sks (1,057 ft³) Halliburton FILLCEM R2 (Type 2-5) + 0.125 lbm/sk Poly-E-Flake + 0.5 lbm/sk Kwik Seal (LCM) + 2.5 lbm/sk Pheno Seal Medium (LCM), Slurry Weight 10.2 ppg, 2.06 ft³/sk, 50% XS in open hole only.

Tail Slurry: 4,800' – 6,500. 271 sx (392 ft³) Halliburton EXPANDACEM C1 (Class G 50/50 poz) + 0.125 lbm/sk Poly-E-Flake + 0.5 lbm/sk Kwik Seal (LCM) + 0.1% HR-5 (Retarder), Slurry Weight 13.5 ppg, 1.45 ft³/sk, 50% XS in open hole.

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4-1/2" Production Casing*:

Lead Slurry: Surface (TOC) – 7,980'. 269sks (764 ft³) Halliburton Extendacem RS3 (Class G 50/50 poz) + 0.125 lbm/sk Poly-E-Flake + 0.25 lbm/sk Kwik Seal (LCM) + 0.1% HR-800 (Retarder). Slurry Weight 11.0 lb/gal, 2.85 ft³/sk, 30% excess over gauge in open hole only.

Tail Slurry: 7,980' – 9,987. 157 sks (228 ft³), Halliburton EXPANDACEM C1 (Class G 50/50 poz) + 0.125 lbm/sk Poly-E-Flake + 0.25 lbm/sk Kwik Seal (LCM) + 0.2% HR-5 (Retarder). Slurry Weight 13.5 lb/gal, 1.45 ft³/sk, 30% excess over gauge hole.

*Final cement volumes to be calculated from caliper log, if run.

6. Auxiliary Equipment

- A. Kelly Cock – yes
- B. Float at the bit – Yes
- C. Monitoring equipment on the mud system – PVT/Flow Show
- D. Full opening safety valve on the rig floor – Yes
- E. Rotating Head – Yes
- F. Maximum anticipated mud weight is 9.3 ppg.
- G. No minimum quantity of weight material will be required to be kept on location.
- H. Gas detector will be used from surface casing depth to TD.

7. Testing, logging and coring program

- A. Cores – N/A
- B. DST – none anticipated
- C. Logging – Mud logging – Surface Casing to TD
CBL will be performed on the intermediate string prior to drill out.
OH Logs: GR-SP-Induction, Neutron Density of intermediate and production hole. RFT will be performed on the Frontier formation.
A contingency CBL across the intermediate casing will be

ONSHORE OIL & GAS ORDER NO. 1
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considered once the well has reached TD if the original CBL was not sufficient.

- D. Formation and Completion Interval:
– Stimulation will be designed for the particular area of interest as encountered. Hydraulic fracturing will be excluded as a possible means of stimulation.

8. Anticipated Abnormal Pressures and Temperatures, Other Potential Hazards

No abnormal temperatures or pressures are anticipated. Maximum anticipated bottom hole pressure equals approximately 4,829 psi. Maximum anticipated bottom hole temperature is 170° F.

H₂S has been encountered in other wells drilled to similar depths in the general area. An H₂S contingency plan, appropriate crew training and detection equipment will be provided prior to entering the possible H₂S zone.

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5M BOP STACK

Rotating Head

Spacer Spool

5M Annular

5M Double Ram

2" Kill Line

2" 5M Check Manual

2" 5M Manual

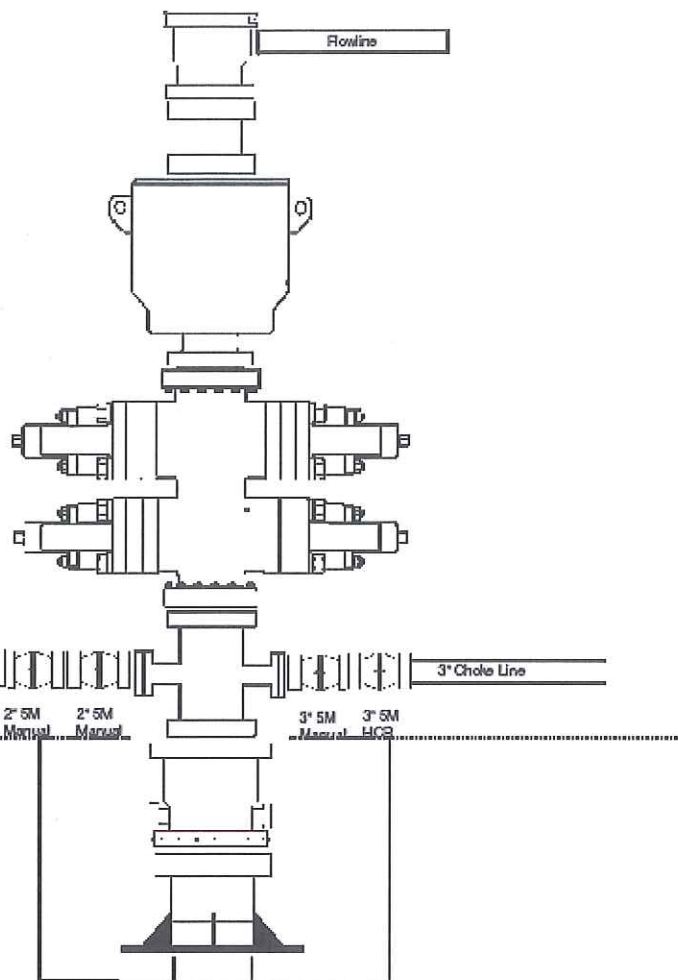
3" 5M Manual

3" 5M HCS

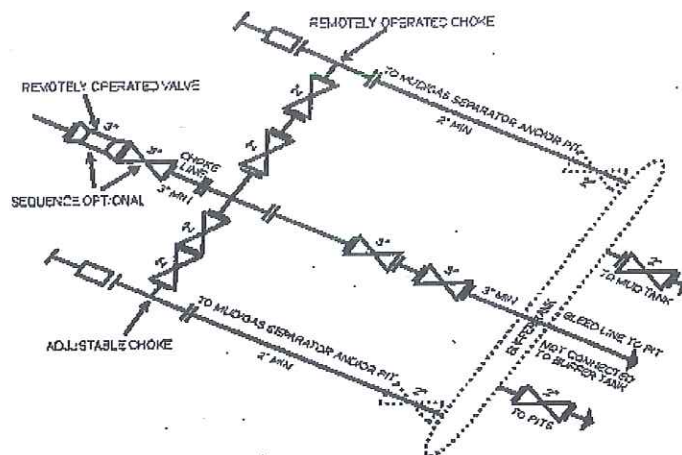
3" Choke Line

G.L.

5M x 9 5/8" 5M Casing Head



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Clay Basin Unit No 66



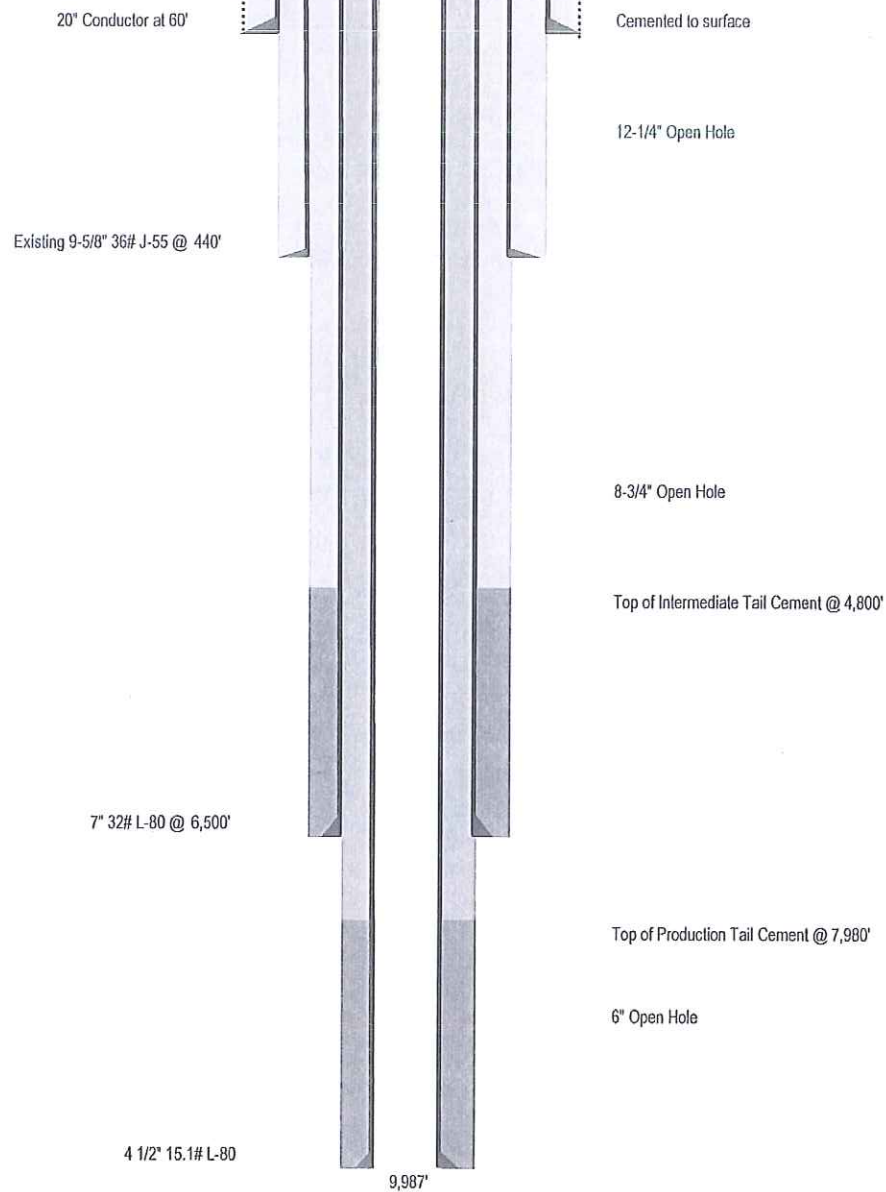
5M CHOKER MANIFOLD EQUIPMENT - CONFIGURATION OF CHOKES MAY VARY

Although not required for any of the choke manifold systems, buffer tanks are sometimes installed downstream of the choke assemblies for the purpose of gaslifting the bleed lines together. When buffer tanks are employed, valves shall be installed upstream to isolate a failure or malfunction without interrupting flow control. Though not shown on 204, 204, 1084, OR 1594 drawings, it would also be applicable to these situations.

[54 FR 29528, Sept. 27, 1989]

Clay Basin Unit No 66
2,154' FSL & 1,974' FEL Sec 21 T3N R24E S.L.B.&M.
Daggett County, Utah
KB 6,388'
GL 6,358'

Updated CRA 10-02-2013
Not to scale



| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|--|--|----------------------------------|---------------------------------------|--|---|--|---|---|---|--|---------------------------------|---|---|--|---|------------------------------------|---|---|---|--|---|--|--|--|---|--|---|--|---|---|---|
| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL 045051B | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. TYPE OF WELL Gas Well | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: 7. UNIT or CA AGREEMENT NAME: CLAY BASIN | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2. NAME OF OPERATOR: QEP ENERGY COMPANY | | 8. WELL NAME and NUMBER: CLAY BASIN U 66 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 3. ADDRESS OF OPERATOR: 11002 East 17500 South , Vernal, Ut, 84078 | | 9. API NUMBER: 43009300670000 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | 9. FIELD and POOL or WILDCAT: CLAY BASIN COUNTY: DAGGETT STATE: UTAH | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| TYPE OF SUBMISSION <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 10/24/2013 <input type="checkbox"/> SPUD REPORT Date of Spud: <input type="checkbox"/> DRILLING REPORT Report Date: | TYPE OF ACTION <table style="width: 100%;"> <tr> <td><input type="checkbox"/> ACIDIZE</td> <td><input type="checkbox"/> ALTER CASING</td> <td><input type="checkbox"/> CASING REPAIR</td> </tr> <tr> <td><input type="checkbox"/> CHANGE TO PREVIOUS PLANS</td> <td><input type="checkbox"/> CHANGE TUBING</td> <td><input type="checkbox"/> CHANGE WELL NAME</td> </tr> <tr> <td><input type="checkbox"/> CHANGE WELL STATUS</td> <td><input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS</td> <td><input type="checkbox"/> CONVERT WELL TYPE</td> </tr> <tr> <td><input type="checkbox"/> DEEPEN</td> <td><input type="checkbox"/> FRACTURE TREAT</td> <td><input type="checkbox"/> NEW CONSTRUCTION</td> </tr> <tr> <td><input type="checkbox"/> OPERATOR CHANGE</td> <td><input type="checkbox"/> PLUG AND ABANDON</td> <td><input type="checkbox"/> PLUG BACK</td> </tr> <tr> <td><input type="checkbox"/> PRODUCTION START OR RESUME</td> <td><input type="checkbox"/> RECLAMATION OF WELL SITE</td> <td><input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION</td> </tr> <tr> <td><input type="checkbox"/> REPERFORATE CURRENT FORMATION</td> <td><input type="checkbox"/> SIDETRACK TO REPAIR WELL</td> <td><input type="checkbox"/> TEMPORARY ABANDON</td> </tr> <tr> <td><input type="checkbox"/> TUBING REPAIR</td> <td><input type="checkbox"/> VENT OR FLARE</td> <td><input type="checkbox"/> WATER DISPOSAL</td> </tr> <tr> <td><input type="checkbox"/> WATER SHUTOFF</td> <td><input type="checkbox"/> SI TA STATUS EXTENSION</td> <td><input type="checkbox"/> APD EXTENSION</td> </tr> <tr> <td><input type="checkbox"/> WILDCAT WELL DETERMINATION</td> <td><input checked="" type="checkbox"/> OTHER</td> <td>OTHER: H2S Contingency Plan</td> </tr> </table> | | <input type="checkbox"/> ACIDIZE | <input type="checkbox"/> ALTER CASING | <input type="checkbox"/> CASING REPAIR | <input type="checkbox"/> CHANGE TO PREVIOUS PLANS | <input type="checkbox"/> CHANGE TUBING | <input type="checkbox"/> CHANGE WELL NAME | <input type="checkbox"/> CHANGE WELL STATUS | <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS | <input type="checkbox"/> CONVERT WELL TYPE | <input type="checkbox"/> DEEPEN | <input type="checkbox"/> FRACTURE TREAT | <input type="checkbox"/> NEW CONSTRUCTION | <input type="checkbox"/> OPERATOR CHANGE | <input type="checkbox"/> PLUG AND ABANDON | <input type="checkbox"/> PLUG BACK | <input type="checkbox"/> PRODUCTION START OR RESUME | <input type="checkbox"/> RECLAMATION OF WELL SITE | <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION | <input type="checkbox"/> REPERFORATE CURRENT FORMATION | <input type="checkbox"/> SIDETRACK TO REPAIR WELL | <input type="checkbox"/> TEMPORARY ABANDON | <input type="checkbox"/> TUBING REPAIR | <input type="checkbox"/> VENT OR FLARE | <input type="checkbox"/> WATER DISPOSAL | <input type="checkbox"/> WATER SHUTOFF | <input type="checkbox"/> SI TA STATUS EXTENSION | <input type="checkbox"/> APD EXTENSION | <input type="checkbox"/> WILDCAT WELL DETERMINATION | <input checked="" type="checkbox"/> OTHER | OTHER: H2S Contingency Plan |
| <input type="checkbox"/> ACIDIZE | <input type="checkbox"/> ALTER CASING | <input type="checkbox"/> CASING REPAIR | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> CHANGE TO PREVIOUS PLANS | <input type="checkbox"/> CHANGE TUBING | <input type="checkbox"/> CHANGE WELL NAME | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| <input type="checkbox"/> DEEPEN | <input type="checkbox"/> FRACTURE TREAT | <input type="checkbox"/> NEW CONSTRUCTION | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> OPERATOR CHANGE | <input type="checkbox"/> PLUG AND ABANDON | <input type="checkbox"/> PLUG BACK | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> PRODUCTION START OR RESUME | <input type="checkbox"/> RECLAMATION OF WELL SITE | <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> REPERFORATE CURRENT FORMATION | <input type="checkbox"/> SIDETRACK TO REPAIR WELL | <input type="checkbox"/> TEMPORARY ABANDON | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> TUBING REPAIR | <input type="checkbox"/> VENT OR FLARE | <input type="checkbox"/> WATER DISPOSAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> WATER SHUTOFF | <input type="checkbox"/> SI TA STATUS EXTENSION | <input type="checkbox"/> APD EXTENSION | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> WILDCAT WELL DETERMINATION | <input checked="" type="checkbox"/> OTHER | OTHER: H2S Contingency Plan | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc. Per the drilling plans approved on 10/22/2013, please see the attached H2S contingency plan for the above referenced well. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Accepted by the Utah Division of Oil, Gas and Mining Date: November 05, 2013 By: <u><i>Derek Quist</i></u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| NAME (PLEASE PRINT) Jeffery Trlica | | PHONE NUMBER 303 308-3628 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SIGNATURE N/A | | TITLE Permit Agent DATE 10/24/2013 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

H2S Contingency Plan

For

QEP ENERGY

Clay Basin Unit #66

Elevation 6359 ft

NW ¼ SE ¼ of Section 21, T3N, R24E, S.L.B&M.

Latitude 40.981319

Longitude -109.209703

Daggett County, Utah

QEP ENERGY

1050 17th St, Suite 500

Denver, CO 80265

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Introduction

It is the policy of QEP ENERGY to provide a safe and healthful work environment for all of its employees as well as contractors that may work on QEP ENERGY leases. QEP ENERGY makes a continued effort to comply with laws and regulations relative to worker safety and health, and to manage all operations in a manner to reduce risk.

The following is a H₂S contingency plan for the QEP ENERGY, Clay Basin unit #66. It is designed for personnel working on this project to follow in case of an accidental release of hydrogen sulfide during drilling and or completion operations. For the plan to be effective, all personnel must review and be familiar with onsite duties as well as the safety equipment involved.

The purpose of this plan is to act as a guideline for personnel working on the wellsite in the event of a sudden release of hydrogen sulfide. All personnel working on the wellsite as well as service personnel that may travel to location on an unscheduled basis must be familiar with this program. The cooperation and participation of all personnel involved with the drilling operation is necessary for this plan to be effective.

Directions to location:

From Rock Springs, WY take I-80 West 7.9 miles to exit 99
Head south on US 191 for 50.8 miles
Turn left on Browns Park Road (there will be a clay basin sign there).
Go 11.4 miles on the main road then turn left at clay basin camp sign
Go .3 miles and turn right and follow road to location

From Vernal, UT at HY 40 and HY 191 go north 35 miles. Then turn right on HY191 and go 16.8 miles (this will take you over the flaming gorge damn) to half past the WY state. Turn right on the Browns Park Road. Go 11.4 miles on the main road then turn left at the Clay Basin camp sign. Go .3 miles and turn right and follow road to location

I. Duties & Responsibilities

In order to assure proper execution of the contingency plan, it is essential that one person be responsible for and in complete charge of implementing the procedures outlined in this plan. The order of responsibility will be as follows:

1. QEP ENERGY representative on location - if unable to perform his/ her duties
2. Alternate QEP ENERGY representative - if unable to perform his/ her duties
3. Contract Supervisor - if unable to perform his/ her duties
4. Safety consultant representative- if available

A. All Personnel

1. Always be alert for possible H2S alarms- both audible and visual.
2. Become familiar with the location of Safe Briefing Areas (SBA) and the location of protective breathing equipment.
3. Develop ongoing "wind awareness". Be aware of prevailing wind direction as well as nearby uphill areas, should there be no wind.
4. Familiarize yourself with nearest escape routes for safe evacuation
5. Should H2S alarm sound, DON'T PANIC - Remain calm and follow instructions of person in charge.
6. If the H2S alarms sounds:
 - a. Essential personnel shall don the appropriate respiratory protective equipment and follow company procedures. Essential personnel will continue to wear respiratory protective equipment until the area is deemed safe (H2S concentration less than 10 PPM)
 - b. Non-essential personnel shall evacuate to the appropriate safe briefing area using escape-breathing systems. Wait there for further instructions from QEP ENERGY representative.
 - c. Initiate rescue protocol if necessary- following training procedures.

B. QEP ENERGY Foreman

1. The QEP ENERGY foreman will confirm that all personnel on location at any time are trained in H2S safety and aware of above list of duties.
2. The QEP ENERGY foreman will ensure that all personnel observe all safety and emergency procedures.
3. The QEP ENERGY foreman will make an effort to keep the number of personnel on location to a minimum and to ensure that only essential personnel are on location during critical operations.
4. Should an extreme dangerous condition become present, the QEP ENERGY foreman will:
 - a. Assess the situation and advise all personnel by appropriate means of communication.
 - b. Be responsible for determining that the extreme danger condition is warranted and the red flag shall be posted at location entrance.
 - c. Go to safe briefing area and give clear instructions relative to hazard on location, and actions for personnel to follow.
 - d. Notify company and regulatory groups of current situation as outlined in company protocol. Follow appropriate emergency procedures for emergency services notification.
 - e. Proceed to general work area and supervise operations with contract supervisor. Take action to control and reduce the H2S hazard.
 - f. Ensure that essential personnel are properly protected with supplied air breathing equipment and that non-essential personnel are in a "poison gas free" area.
 - g. Be responsible for authorizing evacuation of persons/ residents in area surrounding the well location.
 - h. Commence any ignition procedures if ignition criteria are met.

C. Contract Supervisor

1. If the QEP ENERGY foreman is unable to perform his or her duties, and the alternate foreman is also unable or unavailable to perform his duties, the contract supervisor will assume command of wellsite operations and all responsibilities listed above for the QEP Energy foreman.

2. Ensure that all well site personnel are properly trained to work in H2S environment and fully understand purpose of H2S alarms, and actions to take when alarms activate. Ensure that all crew personnel understand the buddy system, safe briefing areas, and individual duties as well as emergency evacuation procedures.

3. Should an extreme danger operational condition arise, the contract supervisor shall assist the QEP ENERGY foreman by:

- a. Proceeding to the general work area and assisting in supervising general isolation operations.
- b. Ensure that only essential working personnel remain in hazardous areas.
- c. Ensure that all crewmembers that remain in hazardous area, wear respiratory protective equipment until notified that area is "clear" of any toxic gases.
- d. Assign crewmember or other service representative to block entrance to location. No unauthorized personnel will be allowed entry to location.
- e. Help to determine hazardous "danger zones" on location using portable detection equipment and position electric fans to move gas in any high concentration areas.

D. Safety Consultant

1. During normal operations (no H2S present), the safety consultant will be responsible for the following:

- a. Ensure that all wellsite safety equipment is in place and operational.

b. Ensure that all wellsite personnel are familiar with location safety layout and operation of all safety equipment.

c. Assist the QEP ENERGY foreman in performing weekly H2S drills for location personnel.

2. When an operational condition is classified as extreme danger, the safety consultant will be responsible for the following.

a. Account for all wellsite personnel

b. Assess any injuries and direct first aid measure.

c. Ensure that all safety and monitoring equipment is functioning properly.

d. Monitor the safety of wellsite personnel

e. Maintain close communication with QEP ENERGY foreman.

f. Be prepared to assist QEP ENERGY foreman with support for well site crew or other personnel using breathing equipment.

g. Be prepared to assist QEP ENERGY foreman with emergency procedures including possible well ignition.

h. Be prepared to assist with evacuation of any area residents or other personnel working in the immediate area.

II. Well Location Layout

A. Location

1. All respiratory protective equipment and H₂S detection equipment will be rigged up prior to working on the well. The well site crews and other service personnel will be trained at this time. All well site crews will be trained and all safety equipment in place and functioning when work begins on the well.
2. The well site and support equipment will be situated on location to allow for the prevailing winds to blow across the site away from the production equipment or at right angles to the lines from the production equipment.
3. The entrance to the location is designed so that it can be barricaded if a hydrogen sulfide emergency condition arises. An auxiliary exit route will be available so that in case of an emergency, a shift in wind direction would not prevent escape from the location.
4. A minimum of 2 safe briefing areas (SBA) shall be designated for assembly of personnel during emergency conditions. These will be located at least 150 ft. or as practical, from the wellbore and in such a location that at least one area will be upwind of the well at all times. Upon recognition of an emergency situation, all personnel will be trained to assemble at the designated briefing area for instructions.
5. Smoking areas will be established and "No Smoking" signs will be posted around the location.
6. Reliable 24 hour telephone communications will be available at the well site foremen's office.
7. A flare stack will be rigged up and manifolded to the choke system.
8. All equipment that might come in to contact with hydrogen sulfide - drill pipe, drill stem test tools, blowout preventers, casing, choke system, production equipment will meet QEP ENERGY's metallurgy requirements for H₂S service.
9. The production equipment will have a continuous electronic H₂S detection system that automatically will activate visible and audible alarms if hydrogen sulfide is detected. The visible light will activate if 10 ppm H₂S is present. The audible siren will activate if 15 ppm H₂S or higher concentration is present. There will be at least 4 H₂S sensors in place on the well site. They will be located to detect the presence of hydrogen sulfide in areas where it is most likely to come into the atmosphere. The sensor head locations will be: 1) Well head 2) Production separator 3) production tanks 4) Flare stack. Additional sensors will be positioned at the discretion of the well site foreman. At least 1 light and 1 siren

- ✓ will be placed on the safety trailer to indicate the presence of hydrogen sulfide. The light and siren will be strategically placed to be visible to all personnel on the well site. Additional alarm lights & sirens may be added to ensure that all personnel on the well site are able to notice the alarms at any time.

10. The H2S detection equipment will be calibrated as recommended by the manufacturer. Calibration records will be maintained on location.

11. A least 2 windsocks will be placed around the drill site to ensure that everyone on the drilling location can readily determine wind direction.

12. All respiratory protective equipment will be NIOSH/ MSHA approved positive pressure type and maintained according to manufacturer's guidelines. All breathing air used for this equipment will be CGA type Grade D breathing air.

13. Both 30-minute self-contained breathing apparatuses (SCBA) and workline units with escape cylinders will be available on location. There will be sufficient numbers of this supplied air breathing equipment on location to ensure that all personnel on location have 1 piece of equipment available to them. All respiratory protective equipment will use nose cups to prevent fogging in temperatures below 32 F.

14. Electric explosion- proof ventilating fans (bug blowers) will be available to provide air movement in enclosed areas where gas might accumulate.

15. H2S drills will be conducted at least weekly to ensure that all well site personnel are competent in emergency donning procedures. These drills will be recorded in the safety trailer.

16. Electronic voice-mikes will be available while men are working under air.

17. Additional breathing equipment will be provided for non routine operations that require additional service personnel on the well location to ensure that all personnel on the well location have a dedicated supplied air respirator.

18. Location access will be monitored and controlled during "non- routine" operations such as perforating, pressurized pumping, and well testing. The number of personnel on location will be restricted to "essential" personnel only.

III. Safety Procedures

A. Training

All personnel who come onto the location must be properly trained in hydrogen sulfide, nitrogen, and oxygen deficient atmospheres safety. The personnel shall carry documentation with them indicating that the training has occurred within the previous 12 months. All training will comply with federal and state regulatory guidelines.

Training topics shall include at a minimum:

1. Hazards and characteristics of hydrogen sulfide, nitrogen, and oxygen deficient atmospheres and symptoms of exposure to these gases.
2. Proper use, care and limitations of respiratory protective equipment with hands on practice.
3. Use of both fixed and portable detection toxic gas equipment.
4. Work practices to reduce opportunities for toxic gas exposure as well as confined space procedures.
5. First aid for toxic gas exposure and resuscitation equipment.
6. The buddy system
7. Emergency evacuation procedures
8. A review of the contingency plan for the well.

B. Operating Conditions

A three color- flag warning system will be used to notify personnel approaching the drill site as to operating conditions on the wellsite. This system is in compliance with BLM OO#6 and follows industry standards.

Green Flag - Potential Danger

Yellow Flag - Moderate Danger

Red Flag- Extreme Danger - Do not approach if red flag is flying.

C. Evacuation Plan

There are no permanent residents within a 2-mile radius of the well site. QEP has a compressor station that is in a 2 mile radius of this operation. Any need for evacuation all personnel will be notified and evacuated to specified muster area.

D. Emergency Rescue Procedures

Well site personnel should not attempt emergency rescues unless they have been properly trained. A trained person who discovers another person overcome by hydrogen sulfide **should not attempt to rescue without donning the proper breathing equipment**. When making an emergency rescue always use the following procedures:

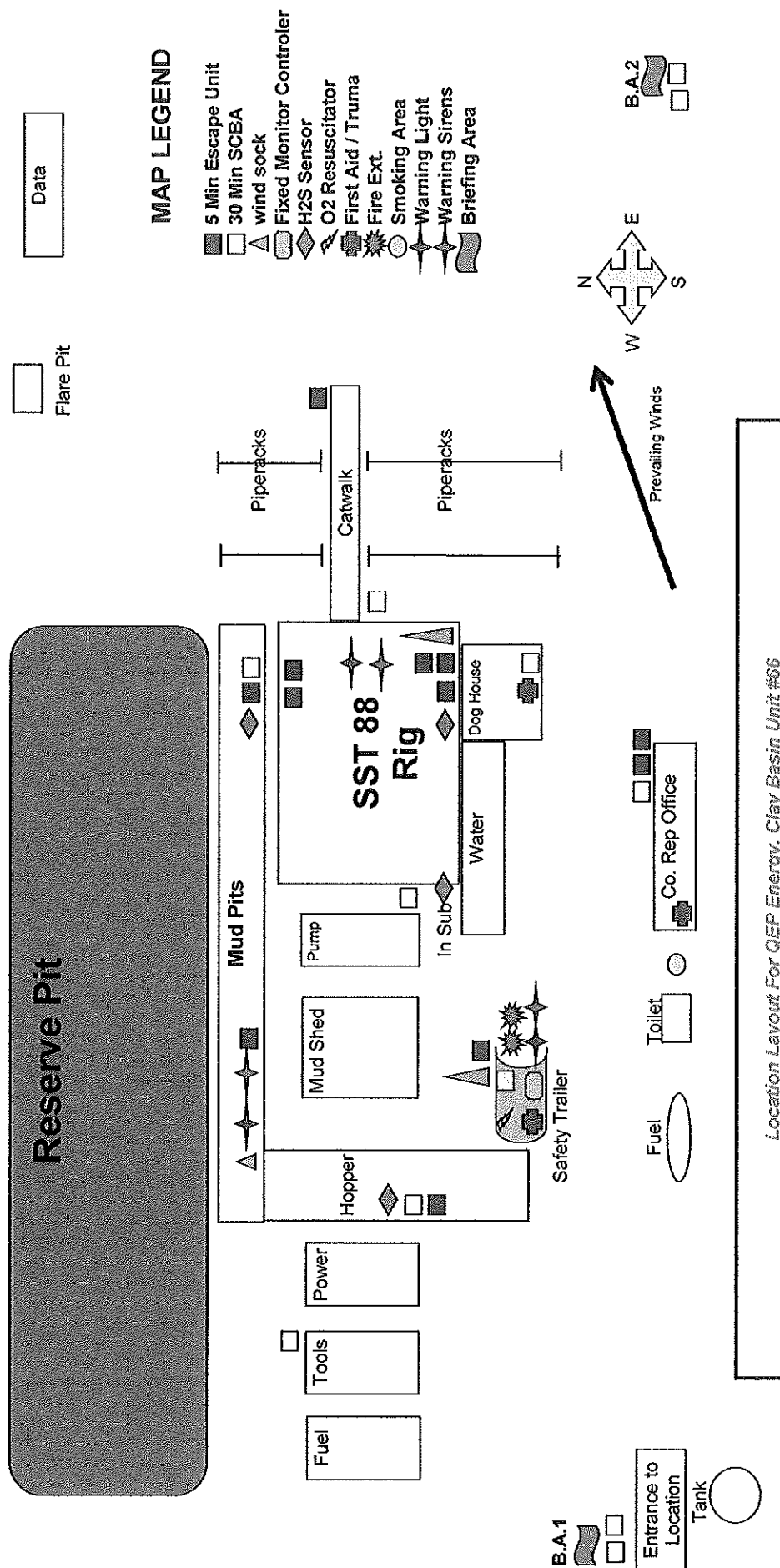
1. Don rescue breathing equipment before attempting to rescue someone.

2. Remove the victim from the contaminated area to an area free of toxic gas by traveling upwind or cross wind. Be certain that you are in a safe area before removing your breathing equipment.
3. If the victim is not breathing, initiate mouth- to mouth resuscitation immediately. Follow CPR guidelines and replace mouth to mouth with a bag mask resuscitator if available.
4. Treat the victim for shock, keeping the victim warm and calm. Never leave the victim alone.
5. Any personnel who experience hydrogen sulfide exposure must be taken to a hospital for examination and their supervisor notified of the incident.
6. Their supervisor shall follow the company Emergency Preparedness plan.

IV. H2S Safety Equipment on production well site

| Item | Amount | Description |
|-------------|---------------|---|
| 1. | 1 | safety trailer with a cascade system of 10-300 cu. ft bottles of compressed breathing air complete with high-pressure regulators |
| 2. | 1000 ft. | Low-pressure airline equipped with Hanson locking fittings. This airline will be rigged up with manifolds to supply breathing air to the rig floor, substructure, derrick, shale shaker area, and mud mixing areas. Three high-pressure refill hoses will be attached to cascade systems for cylinder refill. |
| 3. | Twelve (12) | Scott 30 minute self-contained breathing apparatuses (SCBA). |
| 4. | Twelve (12) | Scott airline units with emergency escape cylinders. |
| 5. | One (1) | 4- channel continuous electronic H2S monitor with audible and visual alarms. The set points for these alarms are 10 ppm for the low alarm and 15 ppm for the high alarm. |
| 6. | Two (2) | Sensidyne portable hand operated pump type detection units with tubes for hydrogen sulfide and sulfur dioxide. |
| 7. | One (1) | oxygen resuscitator with spare oxygen cylinder. |
| 8. | One (1) | trauma first aid kit |
| 9. | One (1) | stokes stretcher and one (1) KED. |
| 10. | Two (2) | windsocks |
| 11. | One (1) | well condition sign with 3 flag system. |
| 12. | Two (2) | Safe Briefing Area (SBA) signs |
| 13. | One (1) | fire blanket |

14. One (1) set air splints
15. Two (2) electric explosion proof fans
16. One (1) bullhorn and chalk board
17. Three (3) 300 cu. ft. air bottles for the safe briefing area.
18. Two (2) 30 # fire extinguishers
19. Six (6) battery powered voice mikes for communication when wearing air masks.
20. One (1) battery powered combustible gas meter



V. Well Ignition Procedures

If it should become apparent that an uncontrolled release of hydrogen sulfide into the atmosphere might endanger the health and safety of the public or well site personnel, the QEP ENERGY foreman will make a decision to ignite the well. The following procedure should be followed before attempting to ignite the well.

A. Ignition equipment - The following equipment will be available and on-site for use by the ignition team.

1. 2-12 gauge flare guns with flare shells
2. 2-500 ft. Fire resistant retrieval ropes
3. 1 portable combustible gas meter
4. Self contained breathing apparatus (SCBA) for each member of the ignition team.
5. 1 backup vehicle with communication equipment

B. Ignition Procedures

1. The QEP ENERGY foreman will ensure that well site personnel are evacuated to a safe area upwind of the well bore prior to any ignition action.
2. The QEP ENERGY foreman and a designated partner "buddy" backed up by well site safety personnel will comprise the ignition team. All team members will be wearing 30 minute SCBAs.
3. The backup crew will be positioned near a radio-equipped vehicle at a safe distance from the sour gas release. They will standby to rescue the actual team igniting the well.
4. The partner of the ignition team will carry a combustible gas/ hydrogen sulfide meter to continuously monitor the area in which they are working and define the perimeter of the gas cloud.
5. The QEP ENERGY foreman will carry the flare gun and shells.

6. The ignition team will determine the hazardous area and establish safe working perimeters. Once this is identified the team will proceed upwind of the leak and fire into the area with flare gun. If trouble is encountered in trying to light the leak, retry to ignite by firing the flare shells at 45 and 90 angles to the gas source, but DO NOT approach closer to the leak.

7. After ignition, monitor for sulfur dioxide and work with the support group to restrict access to the contaminated area.

VI. Residents - Public in R.O.E.

There are no residents within a 2-mile radius of the well site. The surrounding area is federally owned and maintained by the BLM. This land may be used for recreational purposes including hunting and recreational vehicles any time during the completion of this well.

QEP ENERGY Rep.

Total Safety Operations Manager (Evanston, WY)

LARRY ARMSTRONG.....307-679-2387

Total Safety District Manager (Evanston, WY)

Steve Brent.....307-677-2133

Total Safety (Additional Help)

Main Office.....307-789-3882

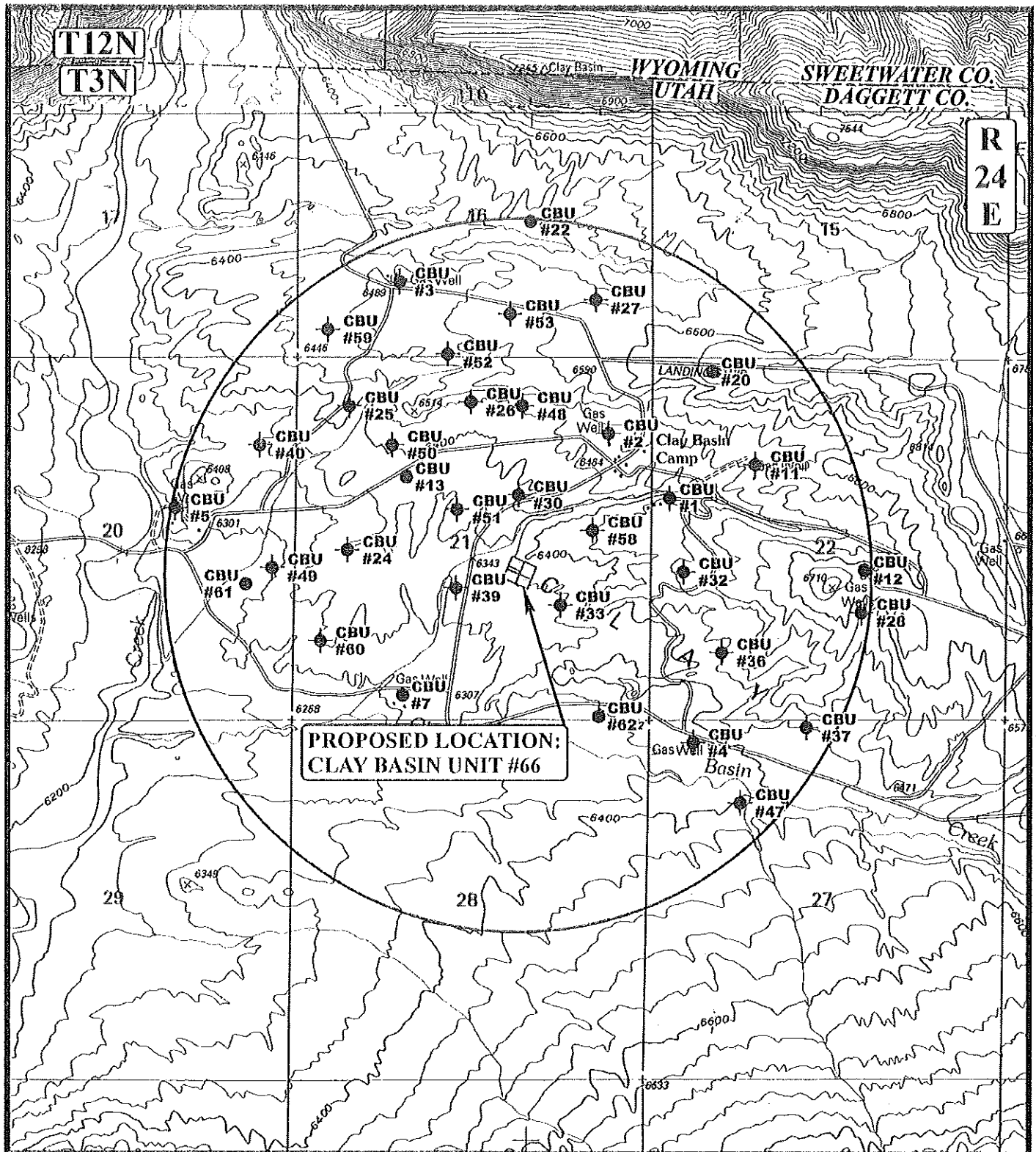
VII. Emergency Phone Directory

A. QEP ENERGY

| <u>Title</u> | <u>Name</u> | <u>Phone</u> |
|-----------------|------------------|----------------|
| QEP ENERGY Rep. | Gary Longhenry | (307) 212-5284 |
| Well Site Rep. | To be Determined | |

B. Emergency Services Phone List

- | | |
|--|-----------------------|
| 1. Memorial Hospital- Rocksprings, WY. | (307) 362-3711 |
| 2. Ambulance Services - | 911 or below |
| 3. Sheriff Department- Daggett County, UT. | (435) 784-3255 |
| 4. Highway Patrol - Utah | (435) 781-6740 |
| 5. Fire Department - Daggett County, UT. | 911 or (435) 885-3390 |
| 6. Bureau of Land Management -- Salt Lake City, UT. Utah State Office | (801) 539-4010 |
| 7. Medical Helicopter--Eagle Air Med--Rocksprings, WY. | (307)-362-2021 |



PROPOSED LOCATION:
CLAY BASIN UNIT #66

LEGEND:

- | | |
|-------------------|-------------------------|
| ○ DISPOSAL WELLS | ○ WATER WELLS |
| ● PRODUCING WELLS | ● ABANDONED WELLS |
| ⊗ SHUT IN WELLS | ⊗ TEMPORARILY ABANDONED |



QEP ENERGY COMPANY

CLAY BASIN UNIT #66
SECTION 21, T3N, R24E, S.L.B.&M.
2154' FSL 1974' FEL



Utah Engineering & Land Surveying
85 South 200 East Vernal, Utah 84078
(435) 789-1017 * FAX (435) 789-1813

TOPOGRAPHIC
MAP

10 30 07
MONTH DAY YEAR

SCALE: 1" = 2000' DRAWN BY: C.P. REV: 10-04-13 S.O.



PROPERTY OF GAS

If gas should be produced, it could be a mixture of Carbon Dioxide, Hydrogen Sulfide, and Methane.

TOXICITY OF VARIOUS GASES

| <u>Common Name</u> | <u>Chemical Formula</u> | <u>Specific Gravity of Air=1</u> | <u>1 Threshold Limit</u> | <u>2 Hazardous Limit</u> | <u>3 Lethal Concern</u> |
|--------------------|-------------------------|----------------------------------|--------------------------|-----------------------------|-------------------------|
| Hydrogen Cyanide | HCN | 0.94 | 10 ppm | 150 ppm/hr | 300 ppm |
| Hydrogen Sulfide | H ₂ S | 1.18 | 10 ppm | 250 ppm/hr | 600 ppm |
| Sulfur Dioxide | SO ₂ | 2.21 | 2 ppm | ----- | 1,000 ppm |
| Chloride | CL ₁ | 2.45 | 1 ppm | 4 ppm/hr | 1,000 ppm |
| Carbon Monoxide | CO | 0.97 | 50 ppm | 400 ppm/hr | 1,000 ppm |
| Carbon Dioxide | CO ₂ | 1.52 | 5,000 ppm | 5% | 10% |
| Methane | CH ₄ | 0.55 | 90,000 ppm | Combustible Above 5% in Air | ----- |

1 Threshold=Concentration at which it is believed that all workers may repeatedly be exposed, day after day, without adverse side effects.

2 Hazardous=Concentration that may cause death.

3 Lethal=Concentration that will cause death with short-term exposure.

HYDROGEN SULFIDE

GENERAL PROPERTIES

Hydrogen Sulfide itself is a colorless and transparent gas and is flammable. It is heavier than air and, hence, may accumulate in low places.

Although the slightest presence of H₂S in the air is normally detectable by its Characteristic "Rotten Egg" odor, it is dangerous to rely on the odor as a means of detecting excessive concentrations because the sense of smell is rapidly lost allowing lethal concentrations to be accumulated without warning. The following table indicates the poisonous nature of Hydrogen Sulfide, which is more toxic than Carbon Monoxide.

COMMON NAMES: Sour Gas, Rotten Egg Gas, Sulphurated Hydrogen, Hydrogen sulfide, Stink Damp, H₂S, Acid Gas, Sweet Gas*

PHYSICAL-CHEMICAL PROPERTIES

- Chemical Formula..... H₂S
1. Specific Gravity (Air = 1.000)..... 1.193 (@ 77°F)
 2. Color None
 3. Odor..... Compared to Rotten Eggs
 4. Odor Threshold 0.13 part of 1 ppm
 5. Corrosivity Reacts with metals, plastics, tissues and nerves.
 6. Solubility in Water 4.0 to 1 in H₂O @ 32°F
2.6 to 1 in H₂O @ 68°F
 7. Effects on Humans Olfactory nerves, respiratory nerves, irritates sensitive membranes in eyes, nose, and throat.
 8. Vapor Pressure 19.6 atmospheres at 25°C
 9. Explosive Limits 4.3% to 46% by volume in air.

* H₂S is a sweet tasting Gas, but often the word "tasting" is left out.

| | |
|-------------------------------|---|
| 10. Ignition Temperature..... | 18°F (Burns with a pale blue flame) |
| 11. Molecular Weight..... | 34.08 |
| 12. Conversion Factors..... | 1 mg/l of air = 717 ppm (at 25°C and 760 mm HG). 1 ppm = 0.00139 mg/l of air. |
| 13. pH..... | 3 in water |

INDUSTRIAL OCCURRENCES

Hydrogen Sulfide exposures occur in certain processes in the petroleum industry, chemical plants, chemical laboratories, sulfur and gypsum mines, viscose rayon and rubber industries, tanneries, and in the manufacture of some chemicals, dyes, and pigments. It may be encountered in excavations in the swampy or filled ground. It is produced when sulfur-containing organic matter decomposes, and it can therefore be found in sewage or organic-waste treatment plants. A common sewer gas, it may find its way into utility manhole, particularly dangerous when encountered in tanks, vessels, and other enclosed spaces.

TOXIC PROPERTIES

Hydrogen Sulfide is an extremely toxic and irritating gas. Free Hydrogen Sulfide in the blood reduces its oxygen carrying capacity, thereby depressing the nervous system. Sufficiently high concentrations can cause blockage of the phrenic nerve, resulting in immediate collapse and death due to respiratory failure and asphyxiation.

* Because Hydrogen Sulfide is oxidized quite rapidly to sulfates in the body, no permanent after effects occur in cases of recovery from acute exposures unless oxygen deprivation of the nervous system is prolonged. However, in cases of acute exposures, there is always the possibility that pulmonary edema may develop. It is also reported that symptoms such as nervousness, dry nonproductive coughing, nausea, headache, and insomnia, lasting up to about 3 days have occurred after acute exposures to Hydrogen Sulfide.

At low concentrations the predominant effect of Hydrogen Sulfide is on the eyes and respiratory tract. Eye irritation, conjunctivitis, pain, lacrimation, keratitis, and photophobia may persist for several days. Respiratory tract symptoms include coughing, painful breathing, and pain in the nose and throat.

There is no evidence that repeated exposures to Hydrogen Sulfide results in accumulative or systemic poisoning. Effects such as eye irritation, respiratory tract irritation, slow pulse rate, lassitude, digestive disturbances, and cold sweats may occur, but these symptoms disappear in a relatively short time after removal from the exposure. Repeated exposures to Hydrogen Sulfide does not appear to cause any increase or decrease in susceptibility to this gas.

The paralytic effect of Hydrogen Sulfide on the olfactory nerve is probably the most significant property of the gas. This paralysis may create a false sense of security. A worker can be overcome after the typical rotten-egg odor has disappeared. Rather than the characteristic Hydrogen Sulfide odor, some victims of sudden acute overexposure have reported a brief sickeningly sweet odor just prior to unconsciousness.

Subjective olfactory responses to various concentrations of Hydrogen Sulfide have be summarized as follows:

| | |
|----------|--|
| 0.02 ppm | No odor |
| 0.13 ppm | Minimal perceptible odor |
| 0.77 ppm | Faint, but readily perceptible odor |
| 4.60 ppm | Easily detectable, moderate odor |
| 27.0 ppm | Strong, impleasant odor, but not intolerable |

Physiological responses to various concentrations of Hydrogen Sulfide have been reported as follows:

| | |
|-------------|---|
| 10 ppm | Beginning eye irritation |
| 50-100 ppm | Slight conjunctivitis and respiratory tract irritation after 1 hour exposure |
| 100 ppm | Coughing, eye irritation, loss of sense of smell after 2-15 minutes. Altered respiration, pain in the eyes, and drowsiness after 15-30 minutes, followed by throat irritation after 1 hour. Several hours' exposure results in gradual increase in severity of these symptoms and death may occur within the next 48 hours. |
| 200-300 ppm | Marked conjunctivitis and respiratory tract irritation after 1 hour exposure |
| 500-700 ppm | Loss of consciousness and possibly death in 30 minutes. |

| | |
|---------------|--|
| 700 ppm | Raped unconsciousness, cessation of respiration, and death. |
| 1000-2000 ppm | Unconsciousness at once, with early cessation of respiration and death in a few minutes. Death may occur even if individual is removed to fresh air at once. |

ACCEPTABLE CONCENTRATIONS

ACCEPTABLE EIGHT-HOUR TIME-WEIGHTED AVERAGE

To avoid discomfort, the Time-Weighted average concentration of Hydrogen Sulfide shall not exceed 10 ppm.

ACCEPTABLE CEILING CONCENTRATION

The acceptable concentration for protection of health for an eight-hour, five-day week shall be 20 ppm, Fluctuations are to occur below this concentration.

ACCEPTABLE MAXIMUM FOR PEAKS ABOVE ACCEPTABLE BASE LINE FOR CONTINUOUS EXPOSURE

A single-peak concentration not exceeding 50 ppm for a maximum of 10 minutes is allowable provided that the daily time-weighted average is not exceeded.

H₂S EQUIVALENTS

| <u>Parts Per Million</u> | <u>Percents</u> | <u>Grains per 100 cu. Ft.</u> |
|------------------------------|-----------------|-----------------------------------|
| 1 | .0001 | .055 |
| 10 | .001 | .55 |
| 18 | .0018 | 1.0 |
| 100 | .01 | 5.5 |
| 1000 | .1 | 55.5 |
| 10000 | 1.0 | 555.5 |

Grains per 100 cu. Ft. = % by volume Mole 636.4
1% by volume = 10,000 ppm

SULFUR DIOXIDE

Sulfur Dioxide (SO₂) is a colorless, transparent gas and is non-flammable.

Sulfur Dioxide is produced during the burning of H₂S. Although SO₂ is heavier than air, it will be picked up by a breeze and carried downwind at elevated temperatures. While Sulfur Dioxide is extremely irritating to the eyes and mucous membranes of the upper respiratory tract, it has exceptionally good warning powers in this respect.

CONCENTRATIONS

EFFECTS

| <u>%SO₂</u> | <u>ppm</u> | |
|------------------------|------------|---|
| .0002 | 2 | Safe for eight (8) hour exposure |
| .0005 | 5 | Pungent odor-normally a person can detect SO ₂ in this range. |
| .0012 | 12 | Throat irritation, coughing, constriction of the chest, tearing and smarting of the eyes. |
| .015 | 150 | So irritating that it can only be endured for a few minutes. |
| .05 | 500 | Causes a sense of suffocation, even with the first breath. |

PHYSICAL PROPERTIES AND CHARACTERISTICS

| | |
|---------------------------|---|
| Chemical Formula..... | SO ₂ |
| 1. Specific Gravity | 2.212 |
| 2. Color | None |
| 3. Flammable..... | No |
| 4. Odor..... | Characteristic, pungent, gives ample warning of its presence. |

5. CorrosivityDry---not corrosive to ordinary metals.
Wet---corrosive to most common metals.
6. Allowable Concentrations.....2 ppm (ACGIH)
2 ppm (OSHA)
7. Effects on HumansIrritates eyes, throat and upper
Respiratory system.

TOXIC PROPERTIES

Sulfur Dioxide is an irritating gas in its vapor form and the odor is so intensely irritating that concentrations of 3 to 5 parts per million in the air are readily detectable by the normal person. In higher concentrations, the severely irritating effect of the gas makes it unlikely that any person would be able to remain in a Sulfur Dioxide contaminated atmosphere unless they were unconscious or trapped.

Sulfur Dioxide gas is intensely irritating to the eyes, throat, and upper respiratory system. Inhalation of this gas in concentrations of 8 to 12 parts per million in air causes throat irritation, coughing, constriction of the chest, tearing and smarting of the eyes. 150 parts per million is so extremely irritating that it can be endured only for a few minutes. 500 parts per million is so acutely irritating to the upper respiratory tract that it causes a sense of suffocation, even with the first breath.

Out of numerous reported exposures to Sulfur Dioxide, there are few references that would indicate pneumonia as an after effect.

| | | | | | |
|--|--|---|---|--|---|
| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 | | | |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL 045051B | | | |
| 1. TYPE OF WELL Gas Well | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: 7. UNIT or CA AGREEMENT NAME: CLAY BASIN | | | |
| 2. NAME OF OPERATOR: QEP ENERGY COMPANY | | 8. WELL NAME and NUMBER: CLAY BASIN U 66 | | | |
| 3. ADDRESS OF OPERATOR: 11002 East 17500 South, Vernal, Ut, 84078 | | 9. API NUMBER: 43009300670000 | | | |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | 9. FIELD and POOL or WILDCAT: CLAY BASIN COUNTY: DAGGETT STATE: UTAH | | | |
| 11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA | | | | | |
| TYPE OF SUBMISSION <input checked="" type="checkbox"/> NOTICE OF INTENT Approximate date work will start: 10/25/2013 <input type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: <input type="checkbox"/> SPUD REPORT Date of Spud: <input type="checkbox"/> DRILLING REPORT Report Date: | TYPE OF ACTION <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION </td> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input checked="" type="checkbox"/> OTHER </td> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: <input type="text" value="Drilling Change"/> </td> </tr> </table> | | <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION | <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input checked="" type="checkbox"/> OTHER | <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: <input type="text" value="Drilling Change"/> |
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| 12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc. QEP Energy is requesting approval for the above referenced well to change the intermediate hole size from 8.75" to 8.5". Per Onshore Order No. 2, QEP requests a variance to the casing coupling annular clearance requirement of 0.422" to a 0.3125" annular clearance due to the change in intermediate hole size. QEP received verbal approval for these changes from the BLM on 10/25/2013. | | | | | |
| Accepted by the Utah Division of Oil, Gas and Mining Date: November 05, 2013 By: <u>Derek Quist</u> | | | | | |
| NAME (PLEASE PRINT) Jeffery Trlica | | PHONE NUMBER 303 308-3628 | | | |
| SIGNATURE N/A | | TITLE Permit Agent DATE 10/25/2013 | | | |

| | | |
|--|--|--|
| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL 045051B |
| 1. TYPE OF WELL Gas Well | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: |
| 2. NAME OF OPERATOR: QEP ENERGY COMPANY | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN |
| 3. ADDRESS OF OPERATOR: 11002 East 17500 South , Vernal, Ut, 84078 | | 8. WELL NAME and NUMBER: CLAY BASIN U 66 |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | 9. API NUMBER: 43009300670000 |
| PHONE NUMBER: 303 308-3068 Ext | | 9. FIELD and POOL or WILDCAT: CLAY BASIN |
| COUNTY: DAGGETT | | STATE: UTAH |

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | | |
|--|---|---|--|--|
| <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: | <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION | <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION | <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION | <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 10/25/2013 |
| <input type="checkbox"/> SPUD REPORT Date of Spud: | <input checked="" type="checkbox"/> OTHER | | | |
| <input type="checkbox"/> DRILLING REPORT Report Date: | OTHER: Drilling Operation | | | |

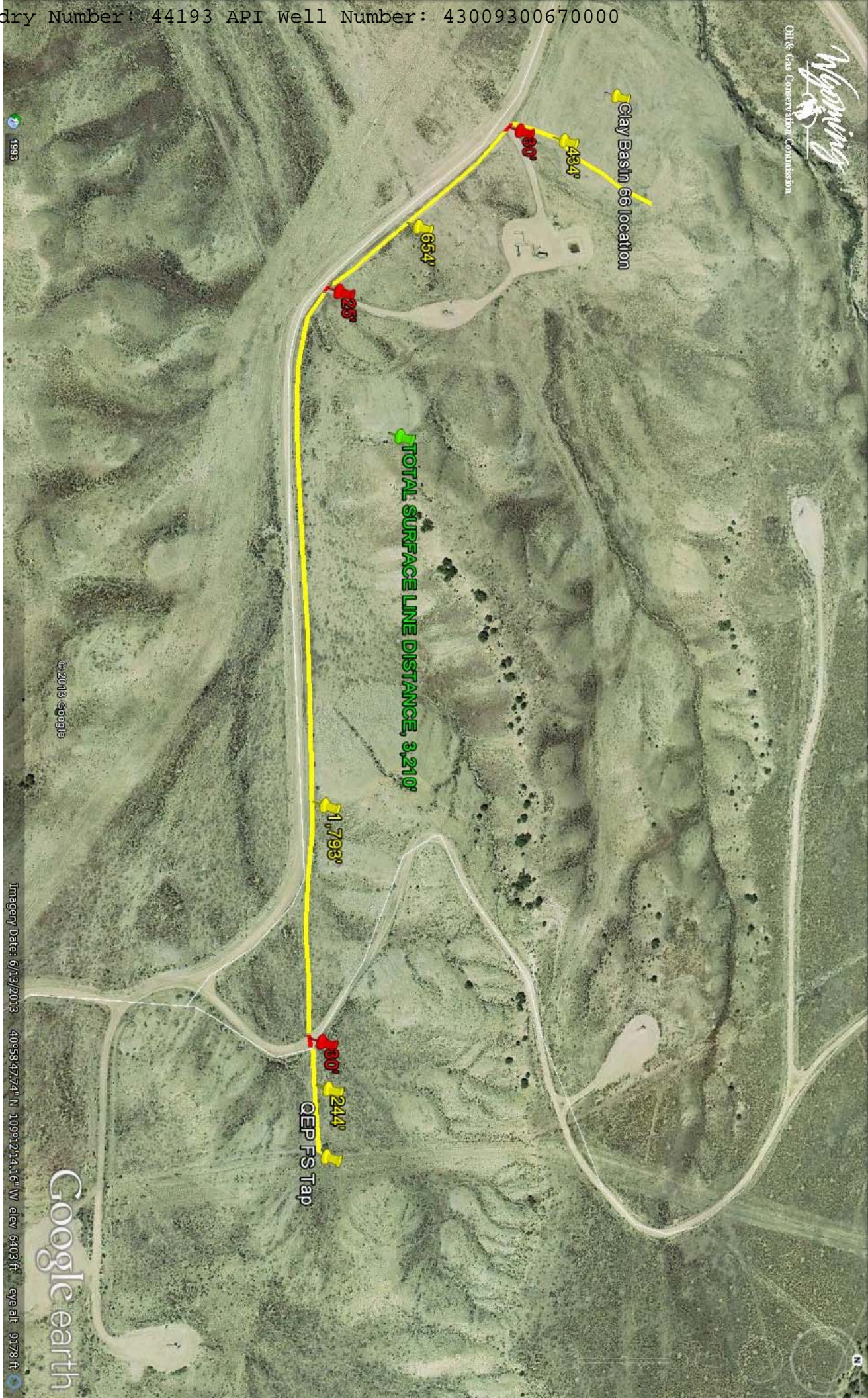
12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.
 The above referenced well commenced drilling at 19:00 on 10/25/2013.

Accepted by the
 Utah Division of
 Oil, Gas and Mining
FOR RECORD ONLY
 November 06, 2013

| | | |
|--|-------------------------------------|------------------------------|
| NAME (PLEASE PRINT) Jeffery Trlica | PHONE NUMBER 303 308-3628 | TITLE Permit Agent |
| SIGNATURE N/A | DATE 10/26/2013 | |

| | | | | | |
|---|---|---|---|--|---|
| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 | | | |
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| STATE: UTAH | | | | | |
| 11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA | | | | | |
| TYPE OF SUBMISSION | TYPE OF ACTION | | | | |
| <input checked="" type="checkbox"/> NOTICE OF INTENT Approximate date work will start: 10/28/2013 <input type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: <input type="checkbox"/> SPUD REPORT Date of Spud: <input type="checkbox"/> DRILLING REPORT Report Date: | <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION </td> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input checked="" type="checkbox"/> OTHER </td> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: <input style="width: 100px;" type="text" value="Fuel Gas Line"/> </td> </tr> </table> | | <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION | <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input checked="" type="checkbox"/> OTHER | <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: <input style="width: 100px;" type="text" value="Fuel Gas Line"/> |
| <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION | <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input checked="" type="checkbox"/> OTHER | <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: <input style="width: 100px;" type="text" value="Fuel Gas Line"/> | | | |
| 12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc. Please see attached detailed explanation and map for a proposed temporary surface fuel gas line to the above referenced well. | | | | | |
| Accepted by the Utah Division of Oil, Gas and Mining FOR RECORD ONLY October 28, 2013 | | | | | |
| NAME (PLEASE PRINT) Jeffery Trlica | PHONE NUMBER 303 308-3628 | TITLE Permit Agent | | | |
| SIGNATURE N/A | DATE 10/28/2013 | | | | |

QEP Energy requests approval to lay a temporary surface fuel gas line for the above referenced well that will consist of a 3" SDR 2 Polyline rated for 300 psi. Line pressure will be approximately 80 psi. The line will be placed on the surface according to the attached Google Earth map, approximately 3,210', that will go from the Clay Basin Unit #66 and will tie into an existing QEP Field Services pipeline. The line will be placed through existing culverts at the western two road crossings. At the third, most eastern, road crossing with no existing culvert, the surface line will be ran through a 6" piece of pipe which will be put on the surface of the road with dirt pushed around the pipe to temporarily secure it in place. There will be no blading or vegetation clearing for the temporary surface line installation and the line will be removed by December 1, 2013. Paul Jibson with Wexpro Company met with Brian Barnett with the Vernal BLM on October 25, 2013, at the proposed location route, to discuss the temporary fuel gas line.



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| <input type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: | | | |
| <input type="checkbox"/> SPUD REPORT Date of Spud: | | | |
| <input type="checkbox"/> DRILLING REPORT Report Date: | | | |

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

QEP Energy Company requests that this well be placed in confidential status for the maximum time allowed.

Accepted by the
Utah Division of
Oil, Gas and Mining
FOR RECORD ONLY
 October 28, 2013

| | | |
|--|-------------------------------------|------------------------------|
| NAME (PLEASE PRINT) Jeffery Trlica | PHONE NUMBER 303 308-3628 | TITLE Permit Agent |
| SIGNATURE N/A | DATE 10/28/2013 | |

CONFIDENTIAL

BLM - Vernal Field Office - Notification Form

Operator QEP ENERGY Rig Name/# SST #88 Submitted
By FORAN STARK Phone Number 307-212-5284
Well Name/Number CLAY BASIN UNIT #66
Qtr/Qtr NESE Section 21 Township 3N Range 24E
Lease Serial Number UTU-63009B
API Number 43-009-30067

Spud Notice – Spud is the initial spudding of the well, not drilling out below a casing string.

Date/Time _____ AM ☐ PM ☐

Casing – Please report time casing run starts, not cementing times.

- ☐ Surface Casing
- ☐ Intermediate Casing
- ☐ Production Casing
- ☐ Liner
- ☐ Other

Date/Time 11/16/2013 5:00 AM ☐ PM ☐

BOPE

- ☐ Initial BOPE test at surface casing point
- ☐ BOPE test at intermediate casing point
- ☐ 30 day BOPE test
- ☐ Other

RECEIVED

NOV 15 2013

DIV. OF OIL, GAS & MINING

Date/Time _____ AM ☐ PM ☐

Remarks WE WILL LOG TONIGHT AND T.D. IN THE MORNING
AND AFTER LAYING DOWN DRILL PIPE WE SHOULD START

RUNNING 4.5" CASING AND FOLLOW UP WITH CEMENTING PROCEDURES

CONFIDENTIAL

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS AND MINING

 AMENDED REPORT ☐ FORM 8
(highlight changes)
WELL COMPLETION OR RECOMPLETION REPORT AND LOG

| 1a. TYPE OF WELL: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> DRY <input type="checkbox"/> OTHER _____ b. TYPE OF WORK: NEW WELL <input checked="" type="checkbox"/> HORIZ. LATS. <input type="checkbox"/> DEEP-EN <input type="checkbox"/> RE-ENTRY <input type="checkbox"/> DIFF. RESVR. <input type="checkbox"/> OTHER _____ | | | | | | 5. LEASE DESIGNATION AND SERIAL NUMBER: UTSL045051B | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|---|---|---|--|----------------------|--|--|-------------------------------------|---|---|--|---|--|---|---------------------|---------------------|--|------------------------------|---------------|----|---|----|--|-----|--|---|--|-------|---|----|---|-----|-------------------------|------|-----------|--------------------|-------------|------|--------|---|---|-------|--|---|-----|---|--|---|-----------|------|---|---|--|-----|-----|----------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| 2. NAME OF OPERATOR: QEP Energy Company | | | | | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 3. ADDRESS OF OPERATOR: 1050 17th St, Ste 500 CITY Denver STATE CO ZIP 80265 | | | | PHONE NUMBER: (303) 672-6900 | | 7. UNIT or CA AGREEMENT NAME 892000323B | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 4. LOCATION OF WELL (FOOTAGES) AT SURFACE: 2154' FSL, 1974' FEL AT TOP PRODUCING INTERVAL REPORTED BELOW: 2154' FSL, 1974' FEL AT TOTAL DEPTH: 2154' FSL, 1974' FEL | | | | | | 8. WELL NAME and NUMBER: Clay Basin Unit #66 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 14. DATE SPURRED: 6/10/2009 | | | | | | 9. API NUMBER: 4300930067 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 15. DATE T.D. REACHED: 11/17/2013 | | | | | | 10. FIELD AND POOL, OR WILDCAT Clay Basin | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 16. DATE COMPLETED: 11/25/2013 | | | | | | 11. QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: NWSE 21 3N 24E | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 18. TOTAL DEPTH: MD 9,863 TVD 9,859 | | | | | | 12. COUNTY Daggett | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 19. PLUG BACK T.D.: MD _____ TVD _____ | | | | | | 13. STATE UTAH | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 20. IF MULTIPLE COMPLETIONS, HOW MANY? * | | | | | | 17. ELEVATIONS (DF, RKB, RT, GL): 6359' GL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 21. DEPTH BRIDGE PLUG SET: MD _____ TVD _____ | | | | | | 23. <table style="width:100%; border: none;"> <tr> <td>WAS WELL CORED?</td> <td>NO <input checked="" type="checkbox"/></td> <td>YES <input type="checkbox"/></td> <td>(Submit analysis)</td> </tr> <tr> <td>WAS DST RUN?</td> <td>NO <input checked="" type="checkbox"/></td> <td>YES <input type="checkbox"/></td> <td>(Submit report)</td> </tr> <tr> <td>DIRECTIONAL SURVEY?</td> <td>NO <input checked="" type="checkbox"/></td> <td>YES <input type="checkbox"/></td> <td>(Submit copy)</td> </tr> </table> | | WAS WELL CORED? | NO <input checked="" type="checkbox"/> | YES <input type="checkbox"/> | (Submit analysis) | WAS DST RUN? | NO <input checked="" type="checkbox"/> | YES <input type="checkbox"/> | (Submit report) | DIRECTIONAL SURVEY? | NO <input checked="" type="checkbox"/> | YES <input type="checkbox"/> | (Submit copy) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WAS WELL CORED? | NO <input checked="" type="checkbox"/> | YES <input type="checkbox"/> | (Submit analysis) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WAS DST RUN? | NO <input checked="" type="checkbox"/> | YES <input type="checkbox"/> | (Submit report) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DIRECTIONAL SURVEY? | NO <input checked="" type="checkbox"/> | YES <input type="checkbox"/> | (Submit copy) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 22. TYPE ELECTRIC AND OTHER MECHANICAL LOGS RUN (Submit copy of each) CBL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 24. CASING AND LINER RECORD (Report all strings set in well) <table border="1" style="width:100%; border-collapse: collapse; text-align: center;"> <thead> <tr> <th>HOLE SIZE</th> <th>SIZE/GRADE</th> <th>WEIGHT (#/ft.)</th> <th>TOP (MD)</th> <th>BOTTOM (MD)</th> <th>STAGE CEMENTER DEPTH</th> <th>CEMENT TYPE & NO. OF SACKS</th> <th>SLURRY VOLUME (BBL)</th> <th>CEMENT TOP **</th> <th>AMOUNT PULLED</th> </tr> </thead> <tbody> <tr> <td>24</td> <td>20 H-40</td> <td>94</td> <td>0</td> <td>90</td> <td></td> <td></td> <td></td> <td>0</td> <td></td> </tr> <tr> <td>12.25</td> <td>9.625 J-55</td> <td>36</td> <td>0</td> <td>528</td> <td></td> <td></td> <td></td> <td>0</td> <td></td> </tr> <tr> <td>8.25</td> <td>7 L-80</td> <td>32</td> <td>0</td> <td>6,526</td> <td></td> <td>990</td> <td>343</td> <td>0</td> <td></td> </tr> <tr> <td>6</td> <td>4.25 L-80</td> <td>15.1</td> <td>0</td> <td>9,855</td> <td></td> <td>510</td> <td>179</td> <td>4690 CBL</td> <td></td> </tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table> | | | | | | | | HOLE SIZE | SIZE/GRADE | WEIGHT (#/ft.) | TOP (MD) | BOTTOM (MD) | STAGE CEMENTER DEPTH | CEMENT TYPE & NO. OF SACKS | SLURRY VOLUME (BBL) | CEMENT TOP ** | AMOUNT PULLED | 24 | 20 H-40 | 94 | 0 | 90 | | | | 0 | | 12.25 | 9.625 J-55 | 36 | 0 | 528 | | | | 0 | | 8.25 | 7 L-80 | 32 | 0 | 6,526 | | 990 | 343 | 0 | | 6 | 4.25 L-80 | 15.1 | 0 | 9,855 | | 510 | 179 | 4690 CBL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| HOLE SIZE | SIZE/GRADE | WEIGHT (#/ft.) | TOP (MD) | BOTTOM (MD) | STAGE CEMENTER DEPTH | CEMENT TYPE & NO. OF SACKS | SLURRY VOLUME (BBL) | CEMENT TOP ** | AMOUNT PULLED | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 24 | 20 H-40 | 94 | 0 | 90 | | | | 0 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 12.25 | 9.625 J-55 | 36 | 0 | 528 | | | | 0 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 8.25 | 7 L-80 | 32 | 0 | 6,526 | | 990 | 343 | 0 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 6 | 4.25 L-80 | 15.1 | 0 | 9,855 | | 510 | 179 | 4690 CBL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 25. TUBING RECORD <table border="1" style="width:100%; border-collapse: collapse; text-align: center;"> <thead> <tr> <th>SIZE</th> <th>DEPTH SET (MD)</th> <th>PACKER SET (MD)</th> <th>SIZE</th> <th>DEPTH SET (MD)</th> <th>PACKER SET (MD)</th> <th>SIZE</th> <th>DEPTH SET (MD)</th> <th>PACKER SET (MD)</th> </tr> </thead> <tbody> <tr> <td>2.375</td> <td>8,843</td> <td>8,839</td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table> | | | | | | | | SIZE | DEPTH SET (MD) | PACKER SET (MD) | SIZE | DEPTH SET (MD) | PACKER SET (MD) | SIZE | DEPTH SET (MD) | PACKER SET (MD) | 2.375 | 8,843 | 8,839 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SIZE | DEPTH SET (MD) | PACKER SET (MD) | SIZE | DEPTH SET (MD) | PACKER SET (MD) | SIZE | DEPTH SET (MD) | PACKER SET (MD) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2.375 | 8,843 | 8,839 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 26. PRODUCING INTERVALS <table border="1" style="width:100%; border-collapse: collapse; text-align: center;"> <thead> <tr> <th>FORMATION NAME</th> <th>TOP (MD)</th> <th>BOTTOM (MD)</th> <th>TOP (TVD)</th> <th>BOTTOM (TVD)</th> </tr> </thead> <tbody> <tr> <td>(A) Weber Sandstone</td> <td>8,850</td> <td>9,863</td> <td> </td> <td> </td> </tr> <tr> <td>(B) </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td>(C) </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td>(D) </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table> | | | | FORMATION NAME | TOP (MD) | BOTTOM (MD) | TOP (TVD) | BOTTOM (TVD) | (A) Weber Sandstone | 8,850 | 9,863 | | | (B) | | | | | (C) | | | | | (D) | | | | | 27. PERFORATION RECORD <table border="1" style="width:100%; border-collapse: collapse; text-align: center;"> <thead> <tr> <th>INTERVAL (Top/Bot - MD)</th> <th>SIZE</th> <th>NO. HOLES</th> <th>PERFORATION STATUS</th> </tr> </thead> <tbody> <tr> <td>8,872 9,072</td> <td>0.42</td> <td>1,200</td> <td>Open <input type="checkbox"/> Squeezed <input type="checkbox"/></td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td>Open <input type="checkbox"/> Squeezed <input type="checkbox"/></td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td>Open <input type="checkbox"/> Squeezed <input type="checkbox"/></td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td>Open <input type="checkbox"/> Squeezed <input type="checkbox"/></td> </tr> </tbody> </table> | | | | INTERVAL (Top/Bot - MD) | SIZE | NO. HOLES | PERFORATION STATUS | 8,872 9,072 | 0.42 | 1,200 | Open <input type="checkbox"/> Squeezed <input type="checkbox"/> | | | | Open <input type="checkbox"/> Squeezed <input type="checkbox"/> | | | | Open <input type="checkbox"/> Squeezed <input type="checkbox"/> | | | | Open <input type="checkbox"/> Squeezed <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| FORMATION NAME | TOP (MD) | BOTTOM (MD) | TOP (TVD) | BOTTOM (TVD) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| (A) Weber Sandstone | 8,850 | 9,863 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| (B) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| (C) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| (D) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| INTERVAL (Top/Bot - MD) | SIZE | NO. HOLES | PERFORATION STATUS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 8,872 9,072 | 0.42 | 1,200 | Open <input type="checkbox"/> Squeezed <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | Open <input type="checkbox"/> Squeezed <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | Open <input type="checkbox"/> Squeezed <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | Open <input type="checkbox"/> Squeezed <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 28. ACID, FRACTURE, TREATMENT, CEMENT SQUEEZE, ETC. <table style="width:100%; border: none;"> <tr> <td>WAS WELL HYDRAULICALLY FRACTURED?</td> <td>YES <input type="checkbox"/> NO <input checked="" type="checkbox"/></td> <td>IF YES -- DATE FRACTURED: _____</td> </tr> <tr> <td>DEPTH INTERVAL</td> <td colspan="2">AMOUNT AND TYPE OF MATERIAL</td> </tr> <tr> <td> </td> <td colspan="2">None</td> </tr> <tr> <td> </td> <td colspan="2"> </td> </tr> </table> | | | | | | | | WAS WELL HYDRAULICALLY FRACTURED? | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> | IF YES -- DATE FRACTURED: _____ | DEPTH INTERVAL | AMOUNT AND TYPE OF MATERIAL | | | None | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WAS WELL HYDRAULICALLY FRACTURED? | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> | IF YES -- DATE FRACTURED: _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DEPTH INTERVAL | AMOUNT AND TYPE OF MATERIAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | None | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 29. ENCLOSED ATTACHMENTS: <table style="width:100%; border: none;"> <tr> <td><input type="checkbox"/> ELECTRICAL/MECHANICAL LOGS</td> <td><input type="checkbox"/> GEOLOGIC REPORT</td> <td><input type="checkbox"/> DST REPORT</td> <td><input type="checkbox"/> DIRECTIONAL SURVEY</td> </tr> <tr> <td><input type="checkbox"/> SUNDRY NOTICE FOR PLUGGING AND CEMENT VERIFICATION</td> <td><input type="checkbox"/> CORE ANALYSIS</td> <td><input checked="" type="checkbox"/> OTHER: <u>Ops Summary</u></td> <td> </td> </tr> </table> | | | | | | <input type="checkbox"/> ELECTRICAL/MECHANICAL LOGS | <input type="checkbox"/> GEOLOGIC REPORT | <input type="checkbox"/> DST REPORT | <input type="checkbox"/> DIRECTIONAL SURVEY | <input type="checkbox"/> SUNDRY NOTICE FOR PLUGGING AND CEMENT VERIFICATION | <input type="checkbox"/> CORE ANALYSIS | <input checked="" type="checkbox"/> OTHER: <u>Ops Summary</u> | | 30. WELL STATUS: <div style="font-size: 2em; text-align: center;">TA</div> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> ELECTRICAL/MECHANICAL LOGS | <input type="checkbox"/> GEOLOGIC REPORT | <input type="checkbox"/> DST REPORT | <input type="checkbox"/> DIRECTIONAL SURVEY | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> SUNDRY NOTICE FOR PLUGGING AND CEMENT VERIFICATION | <input type="checkbox"/> CORE ANALYSIS | <input checked="" type="checkbox"/> OTHER: <u>Ops Summary</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

CONFIDENTIAL**31. INITIAL PRODUCTION****INTERVAL A (As shown in item #26)**

| | | | | | | | | | | |
|----------------------|-------------|-------------|-------------|---------------|---------------|---------------------------|------------|------------|--------------|------------------|
| DATE FIRST PRODUCED: | | TEST DATE: | | HOURS TESTED: | | TEST PRODUCTION RATES: → | OIL – BBL: | GAS – MCF: | WATER – BBL: | PROD. METHOD: |
| CHOKE SIZE: | TBG. PRESS. | CSG. PRESS. | API GRAVITY | BTU – GAS | GAS/OIL RATIO | 24 HR PRODUCTION RATES: → | OIL – BBL: | GAS – MCF: | WATER – BBL: | INTERVAL STATUS: |

INTERVAL B (As shown in item #26)

| | | | | | | | | | | |
|----------------------|-------------|-------------|-------------|---------------|---------------|---------------------------|------------|------------|--------------|------------------|
| DATE FIRST PRODUCED: | | TEST DATE: | | HOURS TESTED: | | TEST PRODUCTION RATES: → | OIL – BBL: | GAS – MCF: | WATER – BBL: | PROD. METHOD: |
| CHOKE SIZE: | TBG. PRESS. | CSG. PRESS. | API GRAVITY | BTU – GAS | GAS/OIL RATIO | 24 HR PRODUCTION RATES: → | OIL – BBL: | GAS – MCF: | WATER – BBL: | INTERVAL STATUS: |

INTERVAL C (As shown in item #26)

| | | | | | | | | | | |
|----------------------|-------------|-------------|-------------|---------------|---------------|---------------------------|------------|------------|--------------|------------------|
| DATE FIRST PRODUCED: | | TEST DATE: | | HOURS TESTED: | | TEST PRODUCTION RATES: → | OIL – BBL: | GAS – MCF: | WATER – BBL: | PROD. METHOD: |
| CHOKE SIZE: | TBG. PRESS. | CSG. PRESS. | API GRAVITY | BTU – GAS | GAS/OIL RATIO | 24 HR PRODUCTION RATES: → | OIL – BBL: | GAS – MCF: | WATER – BBL: | INTERVAL STATUS: |

INTERVAL D (As shown in item #26)

| | | | | | | | | | | |
|----------------------|-------------|-------------|-------------|---------------|---------------|---------------------------|------------|------------|--------------|------------------|
| DATE FIRST PRODUCED: | | TEST DATE: | | HOURS TESTED: | | TEST PRODUCTION RATES: → | OIL – BBL: | GAS – MCF: | WATER – BBL: | PROD. METHOD: |
| CHOKE SIZE: | TBG. PRESS. | CSG. PRESS. | API GRAVITY | BTU – GAS | GAS/OIL RATIO | 24 HR PRODUCTION RATES: → | OIL – BBL: | GAS – MCF: | WATER – BBL: | INTERVAL STATUS: |

32. DISPOSITION OF GAS (Sold, Used for Fuel, Vented, Etc.)**33. SUMMARY OF POROUS ZONES (Include Aquifers):**

Show all important zones of porosity and contents thereof. Cored intervals and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures and recoveries.

34. FORMATION (Log) MARKERS:

| Formation | Top (MD) | Bottom (MD) | Descriptions, Contents, etc. | Name | Top (Measured Depth) |
|-----------|----------|-------------|------------------------------|-----------------|----------------------|
| | | | | Weber SandStone | 8.850 |

35. ADDITIONAL REMARKS (Include plugging procedure)

Well completed and tested. Well temporarily abandoned pending evaluation of facilities.

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records.

NAME (PLEASE PRINT) Jeffrey Trlica TITLE Permit Agent
 SIGNATURE [Signature] DATE 2/6/14

This report must be submitted within 30 days of

- completing or plugging a new well
- drilling horizontal laterals from an existing well bore
- recompleting to a different producing formation
- reentering a previously plugged and abandoned well
- significantly deepening an existing well bore below the previous bottom-hole depth
- drilling hydrocarbon exploratory holes, such as core samples and stratigraphic tests

* ITEM 20: Show the number of completions if production is measured separately from two or more formations.

** ITEM 24: Cement Top – Show how reported top(s) of cement were determined (circulated (CIR), calculated (CAL), cement bond log (CBL), temperature survey (TS)).

Send to: Utah Division of Oil, Gas and Mining
 1594 West North Temple, Suite 1210
 Box 145801
 Salt Lake City, Utah 84114-5801

Phone: 801-538-5340

Fax: 801-359-3940

CONFIDENTIAL

QEP Energy Company

Daily Activity and Cost Summary**Well Name: CLAY BASIN UNIT NO. 66**

| | | | | | | | | | | | | | |
|---|--|--|--|---|--|------------------------|--|------------------------------|--|--|--|-----------------------------------|--|
| API 43-009-30067 | | Surface Legal Location S21-T3N-R24E | | Field Name CLAY BASIN | | County DAGGETT | | State UTAH | | Well Configuration Type Vertical | | | |
| Unique Well ID UT4224017 | | Gr Elev (ft) 6,359 | | Current Elevation 6,389.00, SST 88 - KB 30 | | KB to CF (ft) 30.00 | | Spud Date 6/10/2009 06:00 | | Final Drig Rig Release 11/18/2013 12:00 | | | |
| Total Depth (All) (ft, KB) Original Hole - 9,863.0 | | | | | | | | | | | | | |
| Job Category SITE | | | | Primary Job Type INSTALL FACILITIES | | | | Secondary Job Type | | | | Objective AFE | |
| AFE Number 86739 | | | | Start Date | | | | Job End Date | | | | JOB AFE AMOUNT (Cost) 5,000.00 | |
| Purpose | | | | | | | | | | | | | |

Summary

Contractor

RIG

Rig Type

| DOL | Start Date | End Date | Day Total (Cost) | Cum To Date (Cost) | Summary |
|-----|------------|----------|------------------|--------------------|---------|
| | | | | | |

CONFIDENTIAL

QEP Energy Company

Daily Activity and Cost Summary**Well Name: CLAY BASIN UNIT NO. 66**

| | | | | | | | | | | | |
|-----------------------------|--|--|--|---|--|------------------------|-----------------------------------|---|--|--|--|
| API 43-009-30067 | | Surface Legal Location S21-T3N-R24E | | Field Name CLAY BASIN | | County DAGGETT | | State UTAH | | Well Configuration Type Vertical | |
| Unique Well ID UT4224017 | | Gr Elev (ft) 6,359 | | Current Elevation 6,389.00, SST 88 - KB 30 | | KB to CF (ft) 30.00 | | Spud Date 6/10/2009 06:00 | | Final Drig Rig Release 11/18/2013 12:00 | |
| | | | | | | | | Total Depth (All) (ft, KB) Original Hole - 9,863.0 | | | |
| Job Category COMPLETIONS | | | | Primary Job Type INITIAL COMPLETIONS | | | Secondary Job Type DEVELOPMENT | | | Objective AFE | |
| AFE Number 86739 | | | | Start Date 11/22/2013 | | | Job End Date | | | JOB AFE AMOUNT (Cost) 140,000.00 | |
| Purpose | | | | | | | | | | | |

Summary

| Contractor SST Energy | | | | RIG SST 88 | Rig Type TOP DRIVE |
|--------------------------|------------|------------|------------------|--------------------|---|
| Contractor Key Energy | | | | RIG KEY 6052 | Rig Type |
| DOL | Start Date | End Date | Day Total (Cost) | Cum To Date (Cost) | Summary |
| 1 | 11/22/2013 | 11/23/2013 | 23,252.17 | 23,252.17 | Prep location |
| 2 | 11/23/2013 | 11/24/2013 | 36,401.40 | 59,653.57 | NU WEATERFORD 7" 5K DOUBLE GATE BOP (DRESSED W/2 3/8" ON TOP AND BLIND RAMS ON BOTTOM) AND 7 " 5K ANNULAR. PRESSURE TEST RAM BLOCKS TO 4,500 PSI AND 2500 PSI ON ANNULAR BAG. GOOD TEST. PRESSURE TEST CSG TO 5,000 PSI. GOOD TEST. PRESSURE TEST 4 1/2" X 7" TO 2,000 PSI. GOOD TEST. SECURE WELL AND SDFN. |
| 3 | 11/24/2013 | 11/25/2013 | 83,767.09 | 143,420.66 | MIRU SCHLUMBERGER ELU AND RUN CBL/GR FROM 9,858' TO 4,700'. TOC @ 7,370'. RD CASED HOLE TOOLS AND RU PERFORATING GUNS. PERF 8,872' - 9,072', 6 SPF, 0.42" DIA. IN 11 RUNS. RD ELU . SECURE WELL AND SDFN. |
| 4 | 11/25/2013 | 11/26/2013 | 29,768.77 | 173,189.43 | RIH W/TBG AND PKR. BOTTOM OF BHA @ 8,843'. PUMP 95 BBLS PKR FLUID DOWN ANNULUS AND CIRCULATE UP TBG. SET PKR AND LAND TBG IN HANGER. BOTTOM OF BHA @ 8,842'. PRESSURE UP TO 1,250 PSI ON ANNULUS TO TEST PKR FOR 5 MIN. SET PKR AND LAND TBG IN HANGER. BOTTOM OF BHA @ 8,842'. PRESSURE UP TO 1,250 PSI ON ANNULUS TO TEST PKR FOR 5 MIN. ND ANNULAR, 5K DOUBLE GATE BOP AND 5 K FRAC VALVE. NU PRODUCTION TREE AND TEST. DDH COMPLETED RU TO FLOW BACK TANKS. SECURE WELL AND SDFN. |
| 5 | 11/26/2013 | 11/27/2013 | 24,430.26 | 197,619.69 | SITP - 0 psi. Prep to swab well. Well starting flowing after 3 runs (21.5 bbls). Gas at surface shortly after that. H2S amounts were recorded as high as 100 ppm by Airgas Safety. Set up DDH manifold and flowed well long enough to get gas sample for Questar. Began preparation to RD WOR. Final SITP - 2,750 psi. Secure well and SDFN. |
| 6 | 11/27/2013 | 11/28/2013 | 13,510.33 | 211,130.02 | RD WOR. Build and spot cellar cover. MU fuel gas supply to flare stack. RU SPIDR gauge to wellhead. Open well and test guage. Secure well and gather surface BU pressure data. |
| 7 | 11/28/2013 | 11/29/2013 | 0.00 | 211,130.02 | SI for gathering surface BU pressure data. |
| 8 | 11/29/2013 | 11/30/2013 | 2,113.25 | 213,243.27 | SI for gathering surface BU pressure data. |
| 9 | 11/30/2013 | 12/1/2013 | 9,169.90 | 222,413.17 | SITP - 2,825 psi. MIRU E&E SLU. RIH w/1.903" GR and tagged X nipple @ +/- 8,811' (SL measurement). POOH. RBLH w/Schlumberger dual BH pressure gauges and set on X nipple. POOH and RD E&E SLU. Secure well and SDFN. |
| 10 | 12/1/2013 | 12/2/2013 | 2,047.00 | 224,460.17 | MIRU DDH flare stack and line heater. Prep for 4 point flow test. Carry out 4 point test @ 10/64", 12/64", 14/64" and 16/64" chokes for 3 hr time increments. SI well after the final flow period. Secere well and SDFN. |
| 11 | 12/2/2013 | 12/3/2013 | 8,380.24 | 232,840.41 | SITP - 2,850 psi. Attempted to repair flare stack automatic igniter system for 24 hr drawdown flow test. Tried starting 24 hr drawdown flow test, but flare would not stay lit. H2S levels were determined to be too high to continue test. Operations were shut down. Secured well and SDFN. |
| 12 | 12/3/2013 | 12/4/2013 | 11,987.21 | 244,827.62 | RD DDH FBE. Download SPIDR gauge pressure data. Secure well and SDFN. |
| 13 | 12/4/2013 | 12/5/2013 | 5,719.15 | 250,546.77 | RDMO DDH FBE. Download SPIDR gauge pressure data. Secure well and SDFN. |
| 14 | 12/5/2013 | 12/6/2013 | 41,548.10 | 292,094.87 | Download and send out data from SPIDR gauge. Blow down temporary gas line and disconnect from pipeline. SDFN. |

CONFIDENTIAL

QEP Energy Company

Daily Activity and Cost Summary**Well Name: CLAY BASIN UNIT NO. 66**

| API 43-009-30067 | Surface Legal Location S21-T3N-R24E | | Field Name CLAY BASIN | County DAGGETT | State UTAH | Well Configuration Type Vertical |
|-----------------------------|--|---|--------------------------|------------------------------|--|---|
| Unique Well ID UT4224017 | Gr Elev (ft) 6,359 | Current Elevation 6,389.00, SST 88 - KB 30 | KB to CF (ft) 30.00 | Spud Date 6/10/2009 06:00 | Final Drig Rig Release 11/18/2013 12:00 | Total Depth (All) (ft, KB) Original Hole - 9,863.0 |
| DOL | Start Date | End Date | Day Total (Cost) | Cum To Date (Cost) | Summary | |
| 15 | 12/6/2013 | 12/7/2013 | 137,129.06 | 429,223.93 | SITP - 2,900 psi. MIRU E&E SLU. MU retrieving tool. RIH and latch on to SLB BHP gauges and POOH recording 5 min. pressure data from 8,000' up to surface in 1,000' increments. Lay down gauges/retrieving tool and MU setting tool w/ flow thru plug and RBIH. Set plug in X-nipple @ +/- 8,825'. POOH and RD SLU. MIRU Multi-Chem pump truck and Tu and Frum water truck. RU to wellhead and pump +/- 35 bbls of pkr fluid followed by 10 gallons of methanol. RD and release equipment. Secure well and SD initial completion. | |

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS AND MINING

FORM 6

ENTITY ACTION FORM

Operator: QEP Energy Company Operator Account Number: N 3700
Address: 1050 17th Street, Suite 500
city Denver
state CO zip 80265 Phone Number: (303) 308-3628

Well 1

| API Number | Well Name | | QQ | Sec | Twp | Rng | County |
|--|-----------------------|-------------------|-----------|-----|-----|----------------------------------|---------|
| 4390030067 | Clay Basin Unit 66 | | NWSE | 21 | 3N | 24E | Daggatt |
| Action Code | Current Entity Number | New Entity Number | Spud Date | | | Entity Assignment Effective Date | |
| D | 1025 | 19346 | 6/10/2009 | | | 11/25/13 | |
| Comments: <u>margin</u> <u>CONFIDENTIAL</u> <u>2/27/2014</u> | | | | | | | |

Well 2

| API Number | Well Name | | QQ | Sec | Twp | Rng | County |
|-------------|-----------------------|-------------------|-----------|-----|-----|----------------------------------|--------|
| | | | | | | | |
| Action Code | Current Entity Number | New Entity Number | Spud Date | | | Entity Assignment Effective Date | |
| | | | | | | | |
| Comments: | | | | | | | |

Well 3

| API Number | Well Name | | QQ | Sec | Twp | Rng | County |
|-------------|-----------------------|-------------------|-----------|-----|-----|----------------------------------|--------|
| | | | | | | | |
| Action Code | Current Entity Number | New Entity Number | Spud Date | | | Entity Assignment Effective Date | |
| | | | | | | | |
| Comments: | | | | | | | |

ACTION CODES:

- A** - Establish new entity for new well (single well only)
B - Add new well to existing entity (group or unit well)
C - Re-assign well from one existing entity to another existing entity
D - Re-assign well from one existing entity to a new entity
E - Other (Explain in 'comments' section)

RECEIVED

FEB 24 2014

Jeffrey Trlica

Name (Please Print)

Signature

Permit Agent

Title

2/24/2014

Date

| | |
|--|--|
| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | FORM 9 5. LEASE DESIGNATION AND SERIAL NUMBER: SL 045051B |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: 7. UNIT or CA AGREEMENT NAME: CLAY BASIN |
| 1. TYPE OF WELL Gas Well | 8. WELL NAME and NUMBER: CLAY BASIN U 66 |
| 2. NAME OF OPERATOR: QEP ENERGY COMPANY | 9. API NUMBER: 43009300670000 |
| 3. ADDRESS OF OPERATOR: 11002 East 17500 South , Vernal, Ut, 84078 | PHONE NUMBER: 303 595-5919 Ext |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | 9. FIELD and POOL or WILDCAT: CLAY BASIN COUNTY: DAGGETT STATE: UTAH |

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | |
|---|---|---|---|
| <input checked="" type="checkbox"/> NOTICE OF INTENT Approximate date work will start: 10/15/2015 <input type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: <input type="checkbox"/> SPUD REPORT Date of Spud: <input type="checkbox"/> DRILLING REPORT Report Date: | <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION | <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input checked="" type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> OTHER | <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: <input style="width: 100px;" type="text"/> |

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

Please see attached plug and abandon procedures.

**Approved by the
Utah Division of
Oil, Gas and Mining**

Date: August 18, 2015

By: *Derek Quist*

Please Review Attached Conditions of Approval

| | | |
|--|-------------------------------------|------------------------------|
| NAME (PLEASE PRINT) Jeffery Trlica | PHONE NUMBER 303 308-3628 | TITLE Permit Agent |
| SIGNATURE N/A | DATE 7/27/2015 | |



The Utah Division of Oil, Gas, and Mining

- State of Utah
- Department of Natural Resources

Electronic Permitting System - Sundry Notices

Sundry Conditions of Approval Well Number 43009300670000

- 1. Approval from the BLM is required and should meet the following minimum requirements.**
- 2. Amend Plug #1: A minimum of 50' of cement (4 sx) shall be placed on the CICR after squeezing open perfs.**
- 3. Add Plug #2: A minimum 200' plug (± 15 sx) shall be balanced from $\pm 6800'$ to 6600 to isolate the Nugget formation and the bottom of the gas storage zone.**
- 4. Add Plug #3: A minimum 200' plug (± 15 sx) shall be balanced from $\pm 5650'$ to 5450 to isolate the Dakota formation and the top of the gas storage zone.**
- 5. Amend Plug #4: This plug should be an inside/outside 4 ½" casing plug from approximately 570' to 470'.**
- 6. Amend Plug #5: This plug should be an inside/outside 4 ½" casing plug from 100' to surface.**
- 7. All balanced plugs shall be tagged to ensure that they are at the depth specified.**
- 8. All annuli shall be cemented from a minimum depth of 100' to the surface.**

8/7/2015

Wellbore Diagram

r263

API Well No: 43-009-30067-00-00

Permit No:

Well Name/No: CLAY BASIN U 66

Company Name: QEP ENERGY COMPANY

Location: Sec: 21 T: 3N R: 24E Spot: NWSE

Coordinates: X: 650611 Y: 4538231

Field Name: CLAY BASIN

County Name: DAGGETT

String Information

| String | Bottom (ft sub) | Diameter (inches) | Weight (lb/ft) | Length (ft) |
|--------|--------------------|----------------------|-------------------|----------------|
| HOL1 | 90 | 24 | | |
| COND | 90 | 20 | 94 | 90 |
| HOL2 | 528 | 12.25 | | |
| SURF | 528 | 9.625 | 36 | 528 |
| HOL3 | 6526 | 8.25 | | |
| II | 6526 | 7 | 32 | 6526 |
| HOL4 | 9855 | 6 | | |
| PROD | 9855 | 4.5 | 15.1 | 9855 |
| T1 | 8843 | 2.375 | | |
| PKR | 8839 | | | |

Cement Information

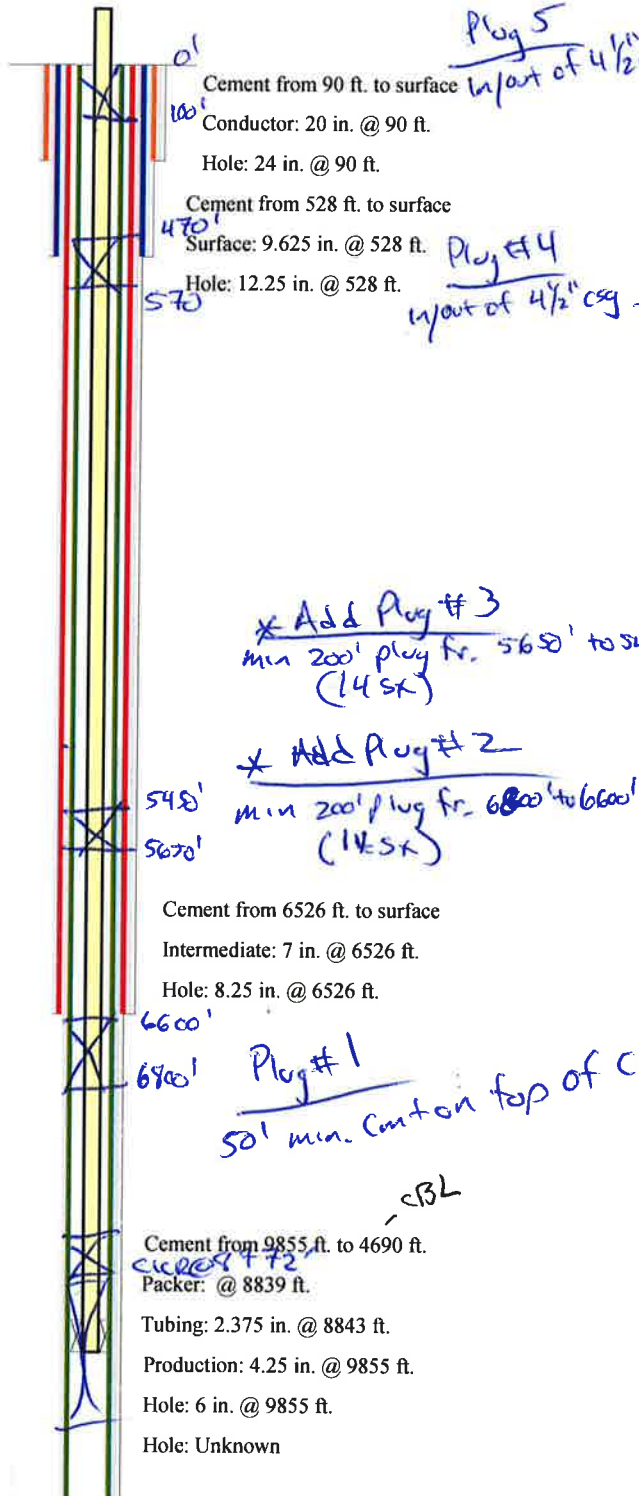
| String | BOC (ft sub) | TOC (ft sub) | Class | Sacks |
|--------|-----------------|-----------------|-------|-------|
| COND | 90 | 0 | | |
| II | 6526 | 0 | UK | 990 |
| PROD | 9855 | 4690 | UK | 510 |
| SURF | 528 | 0 | | |

Perforation Information

| Top (ft sub) | Bottom (ft sub) | Shts/Ft | No Shts | Dt Squeeze |
|-----------------|--------------------|---------|---------|------------|
| 8872 | 9072 | | | |

Formation Information

| Formation | Depth |
|-----------|-------|
| WEBR | 8850 |
| DKTA | 5590 |
| FRMTR | 5220 |
| Nugget | 6680 |



TD: 9863 TVD: 9859 PBD:



Version 1
May 29, 2015

Clay Basin Unit 66 Proposed P&A Procedure

Section 21-3N-24E

Daggett Co., UT

***Please be advised that this well contains H2S**

Operations Engineer

Kari Phillips

Kari.Phillips@qepres.com

(303) 405-6670 (Office)

(405) 593-6105 (Mobile)

Casing Detail

| Casing Desc. | OD [in] | Drift [in] | Wt. [lb/ft] | Grade | Set Depth [ft] | PBTD [ft] | TOC |
|--------------|---------|------------|-------------|-------|----------------|-----------|---------|
| Conductor | 20 | - | 94 | H-40 | 90 | - | Surface |
| Surface | 9-5/8 | - | 36 | J-55 | 528 | - | Surface |
| Intermediate | 7 | - | 32 | L-80 | 6526 | - | Surface |
| Production | 4-1/2 | 3.701 | 15.1 | L-80 | 9855 | 9852 | Surface |

Tubing Detail:

| Desc. | OD [in] | Grade | Jts. | Length [ft] | Top [ft] | Bottom [ft] |
|----------------------------|---------|-------|------|-------------|----------|-------------|
| KB | | | | 30 | | |
| Tubing Hanger | | | | .5 | 29.5 | 30 |
| Hydril 533 Pin to Pin | 2-3/8 | L-80 | 1 | .5 | 30 | 30.5 |
| Tubing | 2-3/8 | L-80 | 291 | 8794 | 30.5 | 8824.5 |
| X-Over | 2-3/8 | L-80 | 1 | .9 | 8824.5 | 8825.4 |
| X-Nipple | 2-3/8 | L-80 | 1 | 1.12 | 8825.4 | 8826.5 |
| Tubing (4.7 ppf) | 2-3/8 | L-80 | 1 | 6.16 | 8826.5 | 8832.7 |
| Packer | 2-3/8 | | 1 | 6.2 | 8832.7 | 8838.9 |
| Tubing Pup Joint (4.7 ppf) | 2-3/8 | L-80 | 1 | 2 | 8838.9 | 8840.9 |
| XN Nipple | 2-3/8 | L-80 | 1 | 1.25 | 8840.9 | 8842.2 |
| Wireline Guide | 2-3/8 | L-80 | 1 | .52 | 8842.2 | 8842.7 |

Perforation Detail (Weber Formation):

| Top (ft, KB) | Btm (ft, KB) |
|--------------|--------------|
| 8,872.00 | 8,892.00 |
| 8,892.00 | 8,912.00 |
| 8,912.00 | 8,927.00 |
| 8,927.00 | 8,942.00 |
| 8,942.00 | 8,962.00 |
| 8,962.00 | 8,982.00 |
| 8,982.00 | 9,002.00 |
| 9,002.00 | 9,022.00 |
| 9,022.00 | 9,042.00 |
| 9,042.00 | 9,057.00 |
| 9,057.00 | 9,072.00 |



REGULATORY

Read and understand all conditions of approval and procedure prior to beginning any operations. You are responsible for running the operations in accordance with all regulatory agencies.

Notify applicable regulatory agencies within 24 hours of commencing plugging operations.

PROCEDURE

1. Call Utah and BLM field inspector to notify at least 24 hr prior to MIRU
2. MIRU rig / verify on correct well / Hold pre-job safety meeting. Ensure we have all H2S equipment on location and all personnel trained in H2S safety.
3. ND WH. NU BOP.
4. Release packer and TOH w/ tbg. Stand back tbg to be used to set plugs if needed.
5. TIH w/ bit to PBTD
6. Totally displace hole with non-corrosive mud or kill weight equivalent water based of at least 9ppg minimum weight
7. TOH w/ bit
8. RIH w/ CICR to 50' above top perf (8822')
9. Squeeze cmt under CICR to depth of 50' below bottom perf (9122') and the CICR is capped with 50' of cement above the CICR (8772') – if bailer is used to cap the plug/retainer, 35' of cmt shall be sufficient.
10. Reverse circulate hole until cleaned up.
11. Pressure test csg, if fails, call for orders. (Csg must uphold mechanical integrity or be perforated and squeeze cemented)
12. Spot 100' balanced cmt plug @ 478'-578'
13. POOH
14. POOH, ND BOP, WOC
15. Spot at least 10 sks of cmt or 100' at surface in a manner completely plugging the entire hole. If fallback occurs and is less than 100', 1" to top off as needed
16. Welder to cut off casing and cap with ID plate. (All csg shall be cut-off at the base of the cellar or 3' below final restored ground level (whichever is deeper). The wellbore shall then be covered with a metal plate at least 1/4" thick and welded in place. The well location and identity shall be permanently inscribed. A weep hole shall be left if a metal plate is welded in place.)
17. RDMO

Clay Basin Unit No. 66 (current status: Temporarily Abandoned)

Revised: 4/9/2015

API 43-009-30067

By: KP

2,154' FSL & 1,974' FEL Sec. 21-T3N-R24E SLB&M

Daggett Co., UT

Schematic - not drawn to scale

Surface Casing:

12-1/4" Hole

9-5/8", 36#, J-55 @ 528'

Intermediate Casing:

8-3/4" Hole

7", 32#, L-80 @ 6,526'

Production Casing:

6" Hole

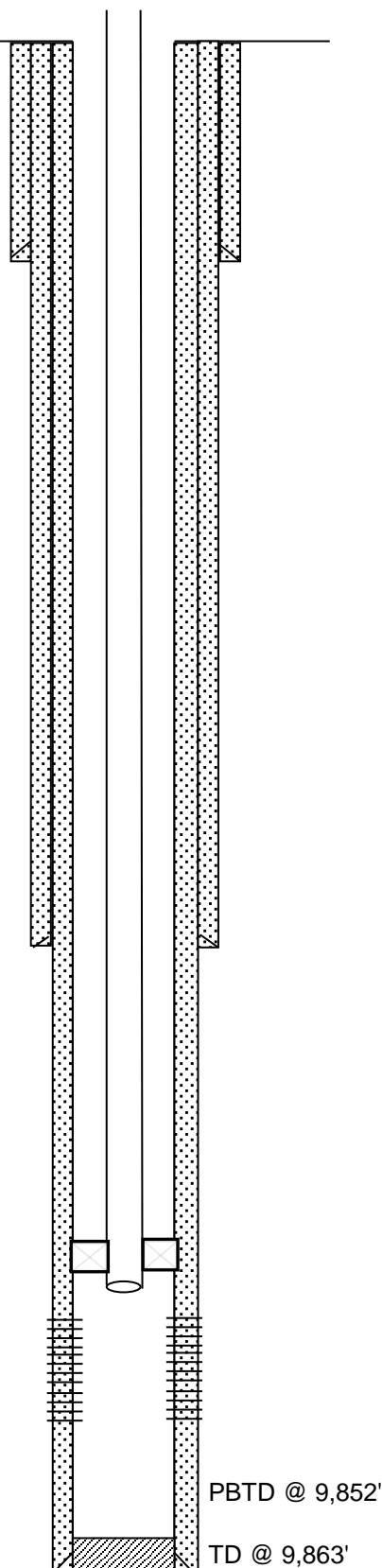
4-1/2", 15.1#, L-80 @ 9,855'

Tubing Detail:

| | | Length | Bottom |
|---------------------------|--------|--------|----------|
| Tubing 2-3/8", 4.7#, L-80 | | | 8,824.50 |
| X-over | 2-3/8" | 0.9 | 8,825.40 |
| X Nipple | 2-3/8" | 1.12 | 8,826.50 |
| Tubing | 2-3/8" | 6.16 | 8,832.70 |
| Packer | 2-3/8" | 6.2 | 8,838.90 |
| Tubing pup joint | 2-3/8" | 2.04 | 8,840.90 |
| XN Nipple | 2-3/8" | 1.25 | 8842.20 |
| Wireline Guide | 2-3/8" | 0.52 | 8842.70 |

Perforations: 6 SPF, 60 Deg Phase

| Top (ft, KB) | Btm (ft, KB) |
|--------------|--------------|
| 8,872.00 | 8,892.00 |
| 8,892.00 | 8,912.00 |
| 8,912.00 | 8,927.00 |
| 8,927.00 | 8,942.00 |
| 8,942.00 | 8,962.00 |
| 8,962.00 | 8,982.00 |
| 8,982.00 | 9,002.00 |
| 9,002.00 | 9,022.00 |
| 9,022.00 | 9,042.00 |
| 9,042.00 | 9,057.00 |
| 9,057.00 | 9,072.00 |

KB 6388'
GL 6358'

Clay Basin Unit No. 66 (Proposed P&A)

API 43-009-30067

2,154' FSL & 1,974' FEL Sec. 21-T3N-R24E SLB&M

Daggett Co., UT

Revised: 4/24/2015

By: KP

Schematic - not drawn to scale

Surface Casing:

12-1/4" Hole

9-5/8", 36#, J-55 @ 528'

Intermediate Casing:

8-3/4" Hole

7", 32#, L-80 @ 6,526'

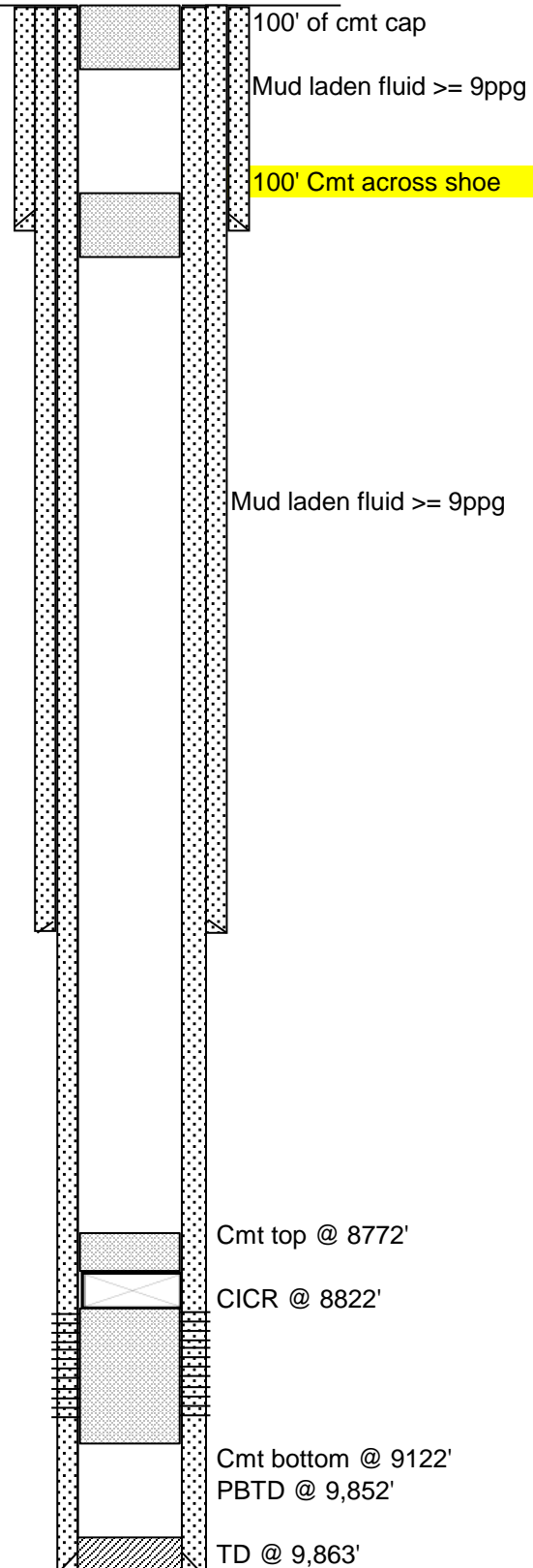
Production Casing:

6" Hole

4-1/2", 15.1#, L-80 @ 9,855'

KB 6388'

GL 6358'

**Perforations: 6 SPF, 60 Deg Phase**

| Top (ft, KB) | Btm (ft, KB) |
|--------------|--------------|
| 8,872.00 | 8,892.00 |
| 8,892.00 | 8,912.00 |
| 8,912.00 | 8,927.00 |
| 8,927.00 | 8,942.00 |
| 8,942.00 | 8,962.00 |
| 8,962.00 | 8,982.00 |
| 8,982.00 | 9,002.00 |
| 9,002.00 | 9,022.00 |
| 9,022.00 | 9,042.00 |
| 9,042.00 | 9,057.00 |
| 9,057.00 | 9,072.00 |



H2S Contingency Plan

For

QEP / Wexpro Company

**Section 21
Township 3 N, R 24 E
2154 FSL, 1974 FEL**

Daggett County, Utah

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Introduction

It is the policy of QEP / Wexpro Company to provide a safe and healthful work environment for all of its employees as well as contractors that may work on QEP / Wexpro Company leases. QEP / Wexpro Company makes a continued effort to comply with laws and regulations relative to worker safety and health, and to manage all operations in a manner to reduce risk.

The following is a H2S contingency plan for the QEP / Wexpro Company, Clay Basin well in Daggett County Utah. It is designed for personnel working on this project to follow in case of an accidental release of hydrogen sulfide during evaluation operations. For the plan to be effective, all personnel must review and be familiar with onsite duties as well as the safety equipment involved.

The purpose of this plan is to act as a guideline for personnel working on the wellsite in the event of a sudden release of hydrogen sulfide. All personnel working on the wellsite as well as service personnel that may travel to location on an unscheduled basis must be familiar with this program. The cooperation and participation of all personnel involved with the Big Horn formation evaluation operation is necessary for this plan to be effective.

Directions to location: 7 miles from Dutch John Utah

I. Duties & Responsibilities

In order to assure proper execution of the contingency plan, it is essential that one person be responsible for and in complete charge of implementing the procedures outlined in this plan. The order of responsibility will be as follows:

1. QEP / Wexpro Company representative on location - if unable to perform his/ her duties
2. Alternate QEP / Wexpro Company representative - if unable to perform his/ her duties
3. Contract Supervisor - if unable to perform his/ her duties
4. Safety consultant representative- if available

A. All Personnel

1. Always be alert for possible H2S alarms- both audible and visual.
2. Become familiar with the location of Safe Briefing Areas (SBA) and the location of protective breathing equipment.
3. Develop ongoing "wind awareness". Be aware of prevailing wind direction as well as nearby uphill areas, should there be no wind.
4. Familiarize yourself with nearest escape routes for safe evacuation
5. Should H2S alarm sound, DON'T PANIC - Remain calm and follow instructions of person in charge.
6. If the H2S alarms sounds:
 - a. Essential personnel shall don the appropriate respiratory protective equipment and follow company procedures. Essential personnel will

continue to wear respiratory protective equipment until the area is deemed safe (H2S concentration less than 10 PPM)

b. Non-essential personnel shall evacuate to the appropriate safe briefing area using escape-breathing systems. Wait there for further instructions from QEP / Wexpro Company representative.

C. Initiate rescue protocol if necessary- following training procedures.

B. QEP / Wexpro Company Foreman

1. The QEP / Wexpro Company foreman will confirm that all personnel on location at any time are trained in H2S safety and aware of above list of duties.

2. The QEP / Wexpro Company foreman will ensure that all personnel observe all safety and emergency procedures.

3. The QEP / Wexpro Company foreman will make an effort to keep the number of personnel on location to a minimum and to ensure that only essential personnel are on location during critical operations.

4. Should an extreme dangerous condition become present, the QEP / Wexpro Company foreman will:

- a. Assess the situation and advise all personnel by appropriate means of communication.
- b. Be responsible for determining that the extreme danger condition is warranted and the red flag shall be posted at location entrance.
- c. Go to safe briefing area and give clear instructions relative to hazard on location, and actions for personnel to follow.
- d. Notify company and regulatory groups of current situation as outlined in company protocol. Follow appropriate emergency procedures for emergency services notification.
- e. Proceed to general work area and supervise operations with contract supervisor. Take action to control and reduce the H2S hazard.
- f. Ensure that essential personnel are properly protected with supplied air breathing equipment and that non-essential personnel are in a "poison gas free" area.
- g. Be responsible for authorizing evacuation of persons/ residents in area surrounding the well location.
- h. Commence any ignition procedures if ignition criteria are met.

C. Contract Supervisor

1. If the QEP / Wexpro Company foreman is unable to perform his or her duties, and the alternate foreman is also unable or unavailable to perform his duties, the contract supervisor will assume command of wellsite operations and all responsibilities listed above for the QEP / Wexpro Company foreman.

2. Ensure that all well site personnel are properly trained to work in H2S environment and fully understand purpose of H2S alarms, and actions to take when alarms activate. Ensure that all crew personnel understand the buddy system, safe briefing areas, and individual duties as well as emergency evacuation procedures.

3. Should an extreme danger operational condition arise, the contract supervisor shall assist the QEP / Wexpro Company foreman by:

- a. Proceeding to the general work area and assisting in supervising general isolation operations.
- b. Ensure that only essential working personnel remain in hazardous areas.
- c. Ensure that all crewmembers that remain in hazardous area, wear respiratory protective equipment until notified that area is "clear" of any toxic gases.
- d. Assign crewmember or other service representative to block entrance to location. No unauthorized personnel will be allowed entry to location.
- e. Help to determine hazardous "danger zones" on location using portable detection equipment and position electric fans to move gas in any high concentration areas.

D. Safety Consultant

1. During normal operations (no H2S present), the safety consultant will be responsible for the following:

- a. Ensure that all wellsite safety equipment is in place and operational.
- b. Ensure that all wellsite personnel are familiar with location safety layout and operation of all safety equipment.
- c. Assist the QEP / Wexpro Company foreman in performing weekly H2S drills for location personnel.

2. When an operational condition is classified as extreme danger, the safety consultant will be responsible for the following:

- a. Account for all wellsite personnel
- b. Assess any injuries and direct first aid measure.
- c. Ensure that all safety and monitoring equipment is functioning properly.
- d. Monitor the safety of wellsite personnel
- e. Maintain a close communication with QEP / Wexpro Company foreman.
- f. Be prepared to assist QEP / Wexpro Company foreman with support for well site crew or other personnel using breathing equipment.
- g. Be prepared to assist QEP / Wexpro Company foreman with emergency procedures including possible well ignition.
- h. Be prepared to assist with evacuation of any area residents or other personnel working in the immediate area.

II. Well Location Layout

A. Location

1. All respiratory protective equipment and H₂S detection equipment will be rigged up prior to working on the well. The well site crews and other service personnel will be trained at this time. All well site crews will be trained and all safety equipment in place and functioning when work begins on the well.

2. The well site and support equipment will be situated on location to allow for the prevailing winds to blow across the site away from the production equipment or at right angles to the lines from the production equipment.

3. The entrance to the location is designed so that it can be barricaded if a hydrogen sulfide emergency condition arises. An auxiliary exit route will be available so that in case of an emergency, a shift in wind direction would not prevent escape from the location.

4. A minimum of 2 safe briefing areas (SBA) shall be designated for assembly of personnel during emergency conditions. These will be located at least 150 ft. or as practical, from the wellbore and in such a location that at least one area will be upwind of the well at all times. Upon recognition of an emergency situation, all personnel will be trained to assemble at the designated briefing area for instructions.

5. Smoking areas will be established and "No Smoking" signs will be posted around the location.

6. Reliable 24 hour telephone communications will be available at the well site foremen's office.

7. A flare stack will be rigged up and manifolded to the choke system.

8. All equipment that might come in to contact with hydrogen sulfide - drill pipe, drill stem test tools, blowout preventers, casing, choke system, production equipment will meet QEP / Wexpro Company metallurgy requirements for H₂S service.

9. The production equipment will have a continuous electronic H₂S detection system that automatically will activate visible and audible alarms if hydrogen sulfide is

detected. The visible light will activate if 10 ppm H₂S is present. The audible siren will activate if 15 ppm H₂S or higher concentration is present. There will be at least 4 H₂S sensors in place on the well site. They will be located to detect the presence of hydrogen sulfide in areas where it is most likely to come into the atmosphere. The sensor head locations will be: 1) Well head 2) Production separator 3) production tanks 4) Flare stack. Additional sensors will be positioned at the discretion of the well site foreman. At least 1 light and 1 siren will be placed on the safety trailer to indicate the presence of hydrogen sulfide. The light and siren will be strategically placed to be visible to all personnel on the well site. Additional alarm lights & sirens may be added to ensure that all personnel on the well site are able to notice the alarms at any time.

10. The H₂S detection equipment will be calibrated as recommended by the manufacturer. Calibration records will be maintained on location.
11. A least 2 windsocks will be placed around the drill site to ensure that everyone on the drilling location can readily determine wind direction.
12. All respiratory protective equipment will be NIOSH/ MSHA approved positive pressure type and maintained according to manufacturer's guidelines. All breathing air used for this equipment will be CGA type Grade D breathing air.
13. Both 30-minute self-contained breathing apparatuses (SCBA) and workline units with escape cylinders will be available on location. There will be sufficient numbers of this supplied air breathing equipment on location to ensure that all personnel on location have 1 piece of equipment available to them. All respiratory protective equipment will use nose cups to prevent fogging in temperatures below 32 F.
14. Electric explosion- proof ventilating fans (bug blowers) will be available to provide air movement in enclosed areas where gas might accumulate.
15. H₂S drills will be conducted at least weekly to ensure that all well site personnel are competent in emergency donning procedures. These drills will be recorded in the safety trailer.
16. Additional breathing equipment will be provided for non routine operations that require additional service personnel on the well location to ensure that all personnel on the well location have a dedicated supplied air respirator.
17. Location access will be monitored and controlled during "non- routine" operations such as perforating, pressurized pumping, and well testing. The number of personnel on location will be restricted to "essential" personnel only.

III. Safety Procedures

A. Training

All personnel who come onto the location must be properly trained in hydrogen sulfide, nitrogen, and oxygen deficient atmospheres safety. The personnel shall carry documentation with them indicating that the training has occurred within the previous 12 months. All training will comply with federal and state regulatory guidelines.

Training topics shall include at a minimum:

1. Hazards and characteristics of hydrogen sulfide, nitrogen, and oxygen deficient atmospheres and symptoms of exposure to these gases.
2. Proper use, care and limitations of respiratory protective equipment with hands on practice.
3. Use of both fixed and portable detection toxic gas equipment.
4. Work practices to reduce opportunities for toxic gas exposure as well as confined space procedures.
5. First aid for toxic gas exposure and resuscitation equipment.
6. The buddy system
7. Emergency evacuation procedures
8. A review of the contingency plan for the well.

B. Operating Conditions

A three color- flag warning system will be used to notify personnel approaching the well site as to operating conditions on the wellsite. This system is in compliance with BLM OO#6 and follows industry standards.

Green Flag - Potential Danger

Yellow Flag - Moderate Danger

Red Flag- Extreme Danger - Do not approach if red flag is flying.

C. Evacuation Plan

There are no permanent residents within a 3000 Foot radius of the well site. QEP / Wexpro Company has a production facility within the two mile radius. We will have phone and radios to communicate with the Facility in case of an emergency. The prevailing wind is from the northwest. All regulatory agencies will be notified as soon as possible.

D. Emergency Rescue Procedures

Well site personnel should not attempt emergency rescues unless they have been properly trained. A trained person who discovers another person overcome by hydrogen sulfide **should not attempt to rescue without donning the proper breathing equipment.** When making an emergency rescue always use the following procedures:

1. Don rescue breathing equipment before attempting to rescue someone.
2. Remove the victim from the contaminated area to an area free of toxic gas by traveling upwind or cross wind. Be certain that you are in a safe area before removing your breathing equipment.
3. If the victim is not breathing, initiate mouth- to mouth resuscitation immediately. Follow CPR guidelines and replace mouth to mouth with a bag mask resuscitator if available.
4. Treat the victim for shock, keeping the victim warm and calm. Never leave the victim alone.
5. Any personnel who experience hydrogen sulfide exposure must be taken to a hospital for examination and their supervisor notified of the incident.
6. Their supervisor shall follow the company Emergency Preparedness plan.

IV. H2S Safety Equipment on production well site

| Item | Amount | Description |
|-------------|---------------|---|
| 1. | 1 | safety trailer with a cascade system of 10-300 cu. ft bottles of compressed breathing air complete with high-pressure regulators |
| 2. | 1000 ft. | Low-pressure airline equipped with Hanson locking fittings. This airline will be rigged up with manifolds to supply breathing air to the rig floor, substructure, derrick, shale shaker area, and mud mixing areas. Three high-pressure refill hoses will be attached to cascade systems for cylinder refill. |
| 3. | Eight (8) | Scott 30 minute self-contained breathing apparatuses (SCBA). |
| 4. | Eight (8) | Scott airline units with emergency escape EBA's |
| 5. | One (1) | 4- channel continuous electronic H2S monitor with (4) audible and visual alarms. The set points for these alarms are 10 ppm for the low alarm and 15 ppm for the high alarm. |
| 6. | One (1) | Sensidyne portable hand operated pump type detection units with tubes for hydrogen sulfide and sulfur dioxide. |
| 7. | One (1) | oxygen resuscitator with spare oxygen cylinder. |
| 8. | One (1) | trauma first aid kit |
| 9. | Three (3) | Windsocks |
| 10. | One (1) | well condition sign with 3 flag system. |
| 11. | Two (2) | Safe Briefing Area (SBA) signs with 1- 300 cu/ft. Cylinder Ea. |
| 12. | One (1) | fire blanket |

- | | | |
|-----|-----------|---|
| 13. | One (1) | set air splints |
| 14. | Three (3) | 300 cu. ft. air bottles for the safe briefing area. |
| 15. | One (1) | 30 # fire extinguisher |
| 17. | One (1) | battery powered combustible gas meter |
| 18. | One (1) | Explosion Proof Bug Blower |

A drawing of the well site location will be inserted in this page showing the actual placement of the all safety equipment relative to the other equipment on the well site. This will be completed as soon as all production equipment is in place an before any operations are begun and added to this H2S contingency plan.

V. Well Ignition Procedures

If it should become apparent that an uncontrolled release of hydrogen sulfide into the atmosphere might endanger the health and safety of the public or well site personnel, the QEP / Wexpro Company foreman will make a decision to ignite the well. The following procedure should be followed before attempting to ignite the well.

A. Ignition equipment - The following equipment will be available and on-site for use by the ignition team.

1. 1-12 gauge flare guns with flare shells
2. 1 portable combustible gas meter
3. Self contained breathing apparatus (SCBA) for each member of the ignition team.
4. 1 backup vehicle with communication equipment

B. Ignition Procedures

1. The QEP / Wexpro Company foreman will ensure that well site personnel are evacuated to a safe area upwind of the well bore prior to any ignition action.
2. The QEP / Wexpro Company foreman and a designated partner "buddy" backed up by well site safety personnel will comprise the ignition team. All team members will be wearing 30 minute SCBAs.
3. The backup crew will be positioned near a radio-equipped vehicle at a safe distance from the sour gas release. They will standby to rescue the actual team igniting the well.
4. The partner of the ignition team will carry a combustible gas/ hydrogen sulfide meter to continuously monitor the area in which they are working and define the perimeter of the gas cloud.
5. The QEP / Wexpro Company foreman will carry the flare gun and shells.
6. The ignition team will determine the hazardous area and establish safe working perimeters. Once this is identified the team will proceed upwind of the leak and fire into the area with flare gun. If trouble is encountered in trying to light

the leak, retry to ignite by firing the flare shells at 45 and 90 angles to the gas source, but DO NOT approach closer to the leak.

7. After ignition, monitor for sulfur dioxide and work with the support group to restrict access to the contaminated area.

VI.

VII. Residents - Public in R.O.E.

There are no residents within a 3000 foot radius of the well site. The surrounding area is federally owned and maintained by the BLM. This land may be used for recreational purposes including hunting and recreational vehicles any time during the completion of this well.

QEP / Wexpro Company Rep.

Robert Strother 1-307-922-3627.....

Total Safety (site supervisor)..... TBD

Total Safety Operations Manager (Evanston, WY)

Mark Hannan.....801-558-2101

Total Safety District Manager (Evanston, WY)

Larry Armstrong.....307-679-2387

Total Safety (Additional Help)

Main Office.....307-789-3882

VII. Emergency Phone Directory

A. QEP / Wexpro Company

| <u>Title</u> | <u>Name</u> | <u>Phone</u> |
|---|-----------------------------|---------------------|
| QEP / Wexpro Company Rep. Well Site Representative | Robert Strother----- | 307-922-3627 |

B. Emergency Services Phone List

| | |
|---|-----------------------|
| 1. Sweetwater County Memorial Hospital WY. | (307)-578-2375 |
| 2. Ambulance Services –Sweetwater County, WY. | 911 or (307)-362-6108 |
| 3. Sheriff Department- Sweetwater County, WY. | 911 or (307) 872-6350 |
| 4. Highway Patrol - Wyoming | (307)-352-3101 |
| 5. Fire Department – Sweetwater County, WY. | 911 or (307) 362-9390 |
| 6. Bureau of Land Management - Utah State Office | (307) 578-5931 |
| 7. Medical Helicopter | (800) 525-5220 |
| 8. OSHA Utah | (435)-782-4400 |

This page will be a map of the well location site showing the section and other related facilities and residents within a 5280 ft. radius of the well.

PROPERTY OF GAS

If gas should be produced, it could be a mixture of Carbon Dioxide, Hydrogen Sulfide, and Methane.

TOXICITY OF VARIOUS GASES

| <u>Common Name</u> | <u>Chemical Formula</u> | <u>Specific Gravity of Air=1</u> | <u>1 Threshold Limit</u> | <u>2 Hazardous Limit</u> | <u>3 Lethal Concern</u> |
|--------------------|-------------------------|----------------------------------|--------------------------|-----------------------------|-------------------------|
| Hydrogen Cyanide | HCN | 0.94 | 10 ppm | 150 ppm/hr | 300 ppm |
| Hydrogen Sulfide | H ₂ S | 1.18 | 10 ppm | 250 ppm/hr | 600 ppm |
| Sulfur Dioxide | SO ₂ | 2.21 | 2 ppm | ----- | 1,000 ppm |
| Chloride | CL ₁ | 2.45 | 1 ppm | 4 ppm/hr | 1,000 ppm |
| Carbon Monoxide | CO | 0.97 | 50 ppm | 400 ppm/hr | 1,000 ppm |
| Carbon Dioxide | CO ₂ | 1.52 | 5,000 ppm | 5% | 10% |
| Methane | CH ₄ | 0.55 | 90,000 ppm | Combustible Above 5% in Air | ----- |

1 Threshold=Concentration at which it is believed that all workers may repeatedly be exposed, day after day, without adverse side effects.

2 Hazardous=Concentration that may cause death.

3 Lethal=Concentration that will cause death with short-term exposure.

HYDROGEN SULFIDE

GENERAL PROPERTIES

Hydrogen Sulfide itself is a colorless and transparent gas and is flammable. It is heavier than air and, hence, may accumulate in low places.

Although the slightest presence of H₂S in the air is normally detectable by its Characteristic "Rotten Egg" odor, it is dangerous to rely on the odor as a means of detecting excessive concentrations because the sense of smell is rapidly lost allowing lethal concentrations to be accumulated without warning. The following table indicates the poisonous nature of Hydrogen Sulfide, which is more toxic than Carbon Monoxide.

COMMON NAMES: Sour Gas, Rotten Egg Gas, Sulphurated Hydrogen, Hydrogen sulfide, Stink Damp, H₂S, Acid Gas, Sweet Gas*

PHYSICAL-CHEMICAL PROPERTIES

| | |
|---|---|
| Chemical Formula | H ₂ S |
| 1. Specific Gravity (Air = 1.000) | 1.193 (@ 77°F) |
| 2. Color | None |
| 3. Odor | Compared to Rotten Eggs |
| 4. Odor Threshold..... | 0.13 part of 1 ppm |
| 5. Corrosivity | Reacts with metals, plastics, tissues and nerves. |
| 6. Solubility in Water | 4.0 to 1 in H ₂ O @ 32°F 2.6 to 1 in H ₂ O @ 68°F |
| 7. Effects on Humans | Olfactory nerves, respiratory nerves, irritates Sensitive membranes in eyes, nose, and throat. |
| 8. Vapor Pressure..... | 19.6 atmospheres at 25°C |
| 9. Explosive Limits | 4.3% to 46% by volume in air. |

* H₂S is a sweet tasting Gas, but often the word "tasting" is left out.

| | |
|-------------------------------|---|
| 10. Ignition Temperature..... | 18°F (Burns with a pale blue flame) |
| 11. Molecular Weight..... | 34.08 |
| 12. Conversion Factors..... | 1 mg/1 of air = 717 ppm (at 25°C and 760 mm HG). 1 ppm = 0.00139 mg/1 of air. |
| 13. pH..... | 3 in water |

INDUSTRIAL OCCURRENCES

Hydrogen Sulfide exposures occur in certain processes in the petroleum industry, chemical plants, chemical laboratories, sulfur and gypsum mines, viscose rayon and rubber industries, tanneries, and in the manufacture of some chemicals, dyes, and pigments. It may be encountered in excavations in the swampy or filled ground. It is produced when sulfur-containing organic matter decomposes, and it can therefore be found in sewage or organic-waste treatment plants. A common sewer gas, it may find its way into utility manhole, particularly dangerous when encountered in tanks, vessels, and other enclosed spaces.

TOXIC PROPERTIES

Hydrogen Sulfide is an extremely toxic and irritating gas. Free Hydrogen Sulfide in the blood reduces its oxygen carrying capacity, thereby depressing the nervous system. Sufficiently high concentrations can cause blockage of the phrenic nerve, resulting in immediate collapse and death due to respiratory failure and asphyxiation.

Because Hydrogen Sulfide is oxidized quite rapidly to sulfates in the body, no permanent after effects occur in cases of recovery from acute exposures unless oxygen deprivation of the nervous system is prolonged. However, in cases of acute exposures, there is always the possibility that pulmonary edema may develop. It is also reported that symptoms such as nervousness, dry nonproductive coughing, nausea, headache, and insomnia, lasting up to about 3 days have occurred after acute exposures to Hydrogen Sulfide.

At low concentrations the predominant effect of Hydrogen Sulfide is on the eyes and respiratory tract. Eye irritation, conjunctivitis, pain, lacrimation, keratitis, and photophobia may persist for several days. Respiratory tract symptoms include coughing, painful breathing, and pain in the nose and throat.

There is no evidence that repeated exposures to Hydrogen Sulfide results in accumulative or systemic poisoning. Effects such as eye irritation, respiratory tract irritation, slow pulse rate, lassitude, digestive disturbances, and cold sweats may occur, but these symptoms disappear in a relatively short time after removal from the exposure. Repeated exposures to Hydrogen Sulfide does not appear to cause any increase or decrease in susceptibility to this gas.

The paralytic effect of Hydrogen Sulfide on the olfactory nerve is probably the most significant property of the gas. This paralysis may create a false sense of security. A worker can be overcome after the typical rotten-egg odor has disappeared. Rather than the characteristic Hydrogen Sulfide odor, some victims of sudden acute overexposure have reported a brief sickeningly sweet odor just prior to unconsciousness.

Subjective olfactory responses to various concentrations of Hydrogen Sulfide have been summarized as follows:

| | |
|----------|--|
| 0.02 ppm | No odor |
| 0.13 ppm | Minimal perceptible odor |
| 0.77 ppm | Faint, but readily perceptible odor |
| 4.60 ppm | Easily detectable, moderate odor |
| 27.0 ppm | Strong, unpleasant odor, but not intolerable |

Physiological responses to various concentrations of Hydrogen Sulfide have been reported as follows:

| | |
|-------------|--|
| 10 ppm | Beginning eye irritation |
| 50-100 ppm | Slight conjunctivitis and respiratory tract irritation after 1 hour exposure |
| 100 ppm | Coughing, eye irritation, loss of sense of smell after 2-15 minutes. Altered respirations, pain in the eyes, and drowsiness after 15-30 minutes, followed by throat irritation after 1 hour. Several hours ¹ exposure results in gradual increase in severity of these symptoms and death may occur within the next 48 hours. |
| 200-300 ppm | Marked conjunctivitis and respiratory tract irritation after 1 hour exposure |
| 500-700 ppm | Loss of consciousness and possibly death in 30 minutes. |

| | |
|---------------|--|
| 700 ppm | Rapid unconsciousness, cessation of respiration, and death. |
| 1000-2000 ppm | Unconsciousness at once, with early cessation of respiration and death in a few minutes. Death may occur even if individual is removed to fresh air at once. |

ACCEPTABLE CONCENTRATIONS

ACCEPTABLE EIGHT-HOUR TIME-WEIGHTED AVERAGE

To avoid discomfort, the Time-Weighted average concentration of Hydrogen Sulfide shall not exceed 10 ppm.

ACCEPTABLE CEILING CONCENTRATION

The acceptable concentration for protection of health for an eight-hour, five-day week shall be 20 ppm, Fluctuations are to occur below this concentration.

ACCEPTABLE MAXIMUM FOR PEAKS ABOVE ACCEPTABLE BASE LINE FOR CONTINUOUS EXPOSURE

A single-peak concentration not exceeding 50 ppm for a maximum of 10 minutes is allowable provided that the daily time-weighted average is not exceeded.

H₂S EQUIVALENTS

| <u>Parts Per Million</u> | <u>Percents</u> | <u>Grains per 100 cu. Ft.</u> |
|-------------------------------------|------------------------|--|
| 1 | .0001 | .055 |
| 10 | .001 | .55 |
| 18 | .0018 | 1.0 |
| 100 | .01 | 5.5 |
| 1000 | .1 | 55.5 |
| 10000 | 1.0 | 555.5 |

Grains per 100 cu. Ft. = % by volume Mole 636.4
1% by volume = 10,000 ppm

SULFUR DIOXIDE

Sulfur Dioxide (SO₂) is a colorless, transparent gas and is non-flammable.

Sulfur Dioxide is produced during the burning of H₂S. Although SO₂ is heavier than air, it will be picked up by a breeze and carried downwind at elevated temperatures, While Sulfur Dioxide is extremely irritating to the eyes and mucous membranes of the upper respiratory tract, it has exceptionally good warning powers in this respect.

CONCENTRATIONS

EFFECTS

| <u>%SO₂</u> | <u>ppm</u> | |
|-------------------------------|-------------------|---|
| .0002 | 2 | Safe for eight (8) hour exposure |
| .0005 | 5 | Pungent odor-normally a person can detect SO ₂ in this range. |
| .0012 | 12 | Throat irritation, coughing, constriction of the chest, tearing and smarting of the eyes. |
| .015 | 150 | So irritating that it can only be endured for a few minutes. |
| .05 | 500 | Causes a sense of suffocation, even with the first breath. |

PHYSICAL PROPERTIES AND CHARACTERISTICS

| | |
|-----------------------------------|---|
| Chemical Formula | SO ₂ |
| 1. Specific Gravity..... | 2.212 |
| 2. Color..... | None |
| 3. Flammable | No |
| 4. Odor | Characteristic, pungent, gives ample warning of its presence. |
| 5. Corrostivity..... | Dry---not corrosive to ordinary metals. Wet---corrosive to most common metals. |
| 6. Allowable Concentrations | 2 ppm (ACGIH) 2 ppm (OSHA) |
| 7. Effects on Humans | Irritates eyes, throat and upper Respiratory system. |

TOXIC PROPERTIES

Sulfur Dioxide is an irritating gas in its vapor form and the odor is so intensely irritating that concentrations of 3 to 5 parts per million in the air are readily detectable by the normal person. In higher concentrations, the severely irritating effect of the gas makes it unlikely that any person would be able to remain in a Sulfur Dioxide contaminated atmosphere unless they were unconscious or trapped.

Sulfur Dioxide gas is intensely irritating to the eyes, throat, and upper respiratory system. Inhalation of this gas in concentrations of 8 to 12 parts per million in air causes throat irritation, coughing, constriction of the chest, tearing and smarting of the eyes. 150 parts per million is so extremely irritating that it can be endured only for a few minutes. 500 parts per million is so acutely irritating to the upper respiratory tract that it causes a sense of suffocation, even with the first breath.

Out of numerous reported exposures to Sulfur Dioxide, there are few references that would indicate pneumonia as an after effect.

| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|--|--|----------------------------------|---------------------------------------|--|---|--|---|---|---|--|---------------------------------|---|---|--|--|------------------------------------|---|---|---|--|---|--|--|--|---|--|---|--|---|--------------------------------|---|
| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 5. LEASE DESIGNATION AND SERIAL NUMBER: SL 045051B | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: 7. UNIT or CA AGREEMENT NAME: CLAY BASIN | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. TYPE OF WELL Gas Well | | 8. WELL NAME and NUMBER: CLAY BASIN U 66 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2. NAME OF OPERATOR: QEP ENERGY COMPANY | | 9. API NUMBER: 43009300670000 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 3. ADDRESS OF OPERATOR: 11002 East 17500 South , Vernal, Ut, 84078 | | 9. FIELD and POOL or WILDCAT: CLAY BASIN | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | COUNTY: DAGGETT STATE: UTAH | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| TYPE OF SUBMISSION <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 10/17/2015 <input type="checkbox"/> SPUD REPORT Date of Spud: <input type="checkbox"/> DRILLING REPORT Report Date: | TYPE OF ACTION <table style="width: 100%;"> <tr> <td><input type="checkbox"/> ACIDIZE</td> <td><input type="checkbox"/> ALTER CASING</td> <td><input type="checkbox"/> CASING REPAIR</td> </tr> <tr> <td><input type="checkbox"/> CHANGE TO PREVIOUS PLANS</td> <td><input type="checkbox"/> CHANGE TUBING</td> <td><input type="checkbox"/> CHANGE WELL NAME</td> </tr> <tr> <td><input type="checkbox"/> CHANGE WELL STATUS</td> <td><input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS</td> <td><input type="checkbox"/> CONVERT WELL TYPE</td> </tr> <tr> <td><input type="checkbox"/> DEEPEN</td> <td><input type="checkbox"/> FRACTURE TREAT</td> <td><input type="checkbox"/> NEW CONSTRUCTION</td> </tr> <tr> <td><input type="checkbox"/> OPERATOR CHANGE</td> <td><input checked="" type="checkbox"/> PLUG AND ABANDON</td> <td><input type="checkbox"/> PLUG BACK</td> </tr> <tr> <td><input type="checkbox"/> PRODUCTION START OR RESUME</td> <td><input type="checkbox"/> RECLAMATION OF WELL SITE</td> <td><input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION</td> </tr> <tr> <td><input type="checkbox"/> REPERFORATE CURRENT FORMATION</td> <td><input type="checkbox"/> SIDETRACK TO REPAIR WELL</td> <td><input type="checkbox"/> TEMPORARY ABANDON</td> </tr> <tr> <td><input type="checkbox"/> TUBING REPAIR</td> <td><input type="checkbox"/> VENT OR FLARE</td> <td><input type="checkbox"/> WATER DISPOSAL</td> </tr> <tr> <td><input type="checkbox"/> WATER SHUTOFF</td> <td><input type="checkbox"/> SI TA STATUS EXTENSION</td> <td><input type="checkbox"/> APD EXTENSION</td> </tr> <tr> <td><input type="checkbox"/> WILDCAT WELL DETERMINATION</td> <td><input type="checkbox"/> OTHER</td> <td>OTHER: <input style="width: 100px;" type="text"/></td> </tr> </table> | | <input type="checkbox"/> ACIDIZE | <input type="checkbox"/> ALTER CASING | <input type="checkbox"/> CASING REPAIR | <input type="checkbox"/> CHANGE TO PREVIOUS PLANS | <input type="checkbox"/> CHANGE TUBING | <input type="checkbox"/> CHANGE WELL NAME | <input type="checkbox"/> CHANGE WELL STATUS | <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS | <input type="checkbox"/> CONVERT WELL TYPE | <input type="checkbox"/> DEEPEN | <input type="checkbox"/> FRACTURE TREAT | <input type="checkbox"/> NEW CONSTRUCTION | <input type="checkbox"/> OPERATOR CHANGE | <input checked="" type="checkbox"/> PLUG AND ABANDON | <input type="checkbox"/> PLUG BACK | <input type="checkbox"/> PRODUCTION START OR RESUME | <input type="checkbox"/> RECLAMATION OF WELL SITE | <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION | <input type="checkbox"/> REPERFORATE CURRENT FORMATION | <input type="checkbox"/> SIDETRACK TO REPAIR WELL | <input type="checkbox"/> TEMPORARY ABANDON | <input type="checkbox"/> TUBING REPAIR | <input type="checkbox"/> VENT OR FLARE | <input type="checkbox"/> WATER DISPOSAL | <input type="checkbox"/> WATER SHUTOFF | <input type="checkbox"/> SI TA STATUS EXTENSION | <input type="checkbox"/> APD EXTENSION | <input type="checkbox"/> WILDCAT WELL DETERMINATION | <input type="checkbox"/> OTHER | OTHER: <input style="width: 100px;" type="text"/> |
| <input type="checkbox"/> ACIDIZE | <input type="checkbox"/> ALTER CASING | <input type="checkbox"/> CASING REPAIR | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> CHANGE TO PREVIOUS PLANS | <input type="checkbox"/> CHANGE TUBING | <input type="checkbox"/> CHANGE WELL NAME | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> CHANGE WELL STATUS | <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS | <input type="checkbox"/> CONVERT WELL TYPE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> DEEPEN | <input type="checkbox"/> FRACTURE TREAT | <input type="checkbox"/> NEW CONSTRUCTION | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> OPERATOR CHANGE | <input checked="" type="checkbox"/> PLUG AND ABANDON | <input type="checkbox"/> PLUG BACK | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> PRODUCTION START OR RESUME | <input type="checkbox"/> RECLAMATION OF WELL SITE | <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> REPERFORATE CURRENT FORMATION | <input type="checkbox"/> SIDETRACK TO REPAIR WELL | <input type="checkbox"/> TEMPORARY ABANDON | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> TUBING REPAIR | <input type="checkbox"/> VENT OR FLARE | <input type="checkbox"/> WATER DISPOSAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> WATER SHUTOFF | <input type="checkbox"/> SI TA STATUS EXTENSION | <input type="checkbox"/> APD EXTENSION | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> WILDCAT WELL DETERMINATION | <input type="checkbox"/> OTHER | OTHER: <input style="width: 100px;" type="text"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc. QEP is requesting approval to pump additional cement volumes from what was originally approved and also that the cement blend be revised to 50/50 poz/Class G, 13.5 ppg, 1.44 cuft/sk as this blend is more H2S resistant. Updated P&A procedure is attached and preliminary approval was received via email and phone conversation between Debbie Stanberry (QEP) and Dustin Doucet (UDOGM). | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| NAME (PLEASE PRINT) Valyn Davis | | PHONE NUMBER 435 781-4369 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SIGNATURE N/A | | TITLE Regulatory Affairs Analyst DATE 11/17/2015 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Approved by the
November 18, 2015
Oil, Gas and Mining

Date: _____
By: Dustin Doucet



Version 4
November 16, 2015

Clay Basin Unit 66 Proposed P&A Procedure

Section 21-3N-24E

Daggett Co., UT

*Please be advised that this well contains H2S

AFE PLG-00225

Account Code 5501007

Casing Detail

| Casing Desc. | OD [in] | Drift [in] | Wt. [lb/ft] | Grade | Set Depth [ft] | PBTD [ft] | TOC |
|--------------|---------|------------|-------------|-------|----------------|-----------|---------|
| Conductor | 20 | - | 94 | H-40 | 90 | - | Surface |
| Surface | 9-5/8 | - | 36 | J-55 | 528 | - | Surface |
| Intermediate | 7 | - | 32 | L-80 | 6526 | - | Surface |
| Production | 4-1/2 | 3.701 | 15.1 | L-80 | 9855 | 9852 | Surface |

Tubing Detail:

| Desc. | OD [in] | Grade | Jts. | Length [ft] | Top [ft] | Bottom [ft] |
|----------------------------|---------|-------|------|-------------|----------|-------------|
| KB | | | | 30 | | |
| Tubing Hanger | | | | .5 | 29.5 | 30 |
| Hydril 533 Pin to Pin | 2-3/8 | L-80 | 1 | .5 | 30 | 30.5 |
| Tubing | 2-3/8 | L-80 | 291 | 8794 | 30.5 | 8824.5 |
| X-Over | 2-3/8 | L-80 | 1 | .9 | 8824.5 | 8825.4 |
| X-Nipple | 2-3/8 | L-80 | 1 | 1.12 | 8825.4 | 8826.5 |
| Tubing (4.7 ppf) | 2-3/8 | L-80 | 1 | 6.16 | 8826.5 | 8832.7 |
| Packer | 2-3/8 | | 1 | 6.2 | 8832.7 | 8838.9 |
| Tubing Pup Joint (4.7 ppf) | 2-3/8 | L-80 | 1 | 2 | 8838.9 | 8840.9 |
| XN Nipple | 2-3/8 | L-80 | 1 | 1.25 | 8840.9 | 8842.2 |
| Wireline Guide | 2-3/8 | L-80 | 1 | .52 | 8842.2 | 8842.7 |

Perforation Detail (Weber Formation):

| Top (ft, KB) | Btm (ft, KB) |
|--------------|--------------|
| 8,872.00 | 8,892.00 |
| 8,892.00 | 8,912.00 |
| 8,912.00 | 8,927.00 |
| 8,927.00 | 8,942.00 |
| 8,942.00 | 8,962.00 |
| 8,962.00 | 8,982.00 |
| 8,982.00 | 9,002.00 |
| 9,002.00 | 9,022.00 |
| 9,022.00 | 9,042.00 |
| 9,042.00 | 9,057.00 |
| 9,057.00 | 9,072.00 |



REGULATORY

Read and understand all conditions of approval and procedure prior to beginning any operations. You are responsible for running the operations in accordance with all regulatory agencies.

Notify applicable regulatory agencies within 24 hours of commencing plugging operations.

PROCEDURE

1. Call Utah and BLM field inspector to notify at least 48 hours prior to MIRU
2. Conduct pre-job safety meeting and complete daily JSA
3. Ensure we have all H2S equipment on location and all personnel trained in H2S safety
4. Prior to MIRU, check rig anchors and blow down well if necessary
5. Dig out around wellhead and check surface annulus for pressure
(If present call Kari Phillips #405-593-6105 and Aaron Columbia #970-317-3610 for orders)
6. MIRU P&A equipment, ND wellhead, NU BOP
7. Release packer, TOH and tally, Stand back 8,842'
8. PU 4-1/2" 15.1# CICR, TIH to 8,772' and set, Establish IR
(If no IR call Kari Phillips and Aaron Columbia for orders)
9. Pump 70 sxs of 15.8# type G neat 1.15 cu/ft. yield cement, 20 sxs on top. (asking for approval to pump H2S resistant cement, 50/50 poz/Class G mix, 13.5 ppg, 1.44 cuft/sk)
10. TOH to 8,700', reverse circulate to clear tubing, Pressure test casing to 500psi for 15 minutes
(If test fails call Kari Phillips and Aaron Columbia for orders)
11. TOH and LD to 6,600'
12. Pump 15 sxs of 15.8# type G neat 1.15 cu/ft. yield cement (All balanced plugs shall be tagged to ensure that they are at the depth specified)
13. TOH and LD to 5,450'
14. Pump 15 sxs of 15.8# type G neat 1.15 cu/ft. yield cement (All balanced plugs shall be tagged to ensure that they are at the depth specified)
15. TOH and LD to 5,120''
16. Pump 15 sxs of 15.8# type G neat 1.15 cu/ft. yield cement (All balanced plugs shall be tagged to ensure that they are at the depth specified)
17. TOH and LD to 2,000'
18. Pump 15 sxs of 15.8# type G neat 1.15 cu/ft. yield cement (All balanced plugs shall be tagged to ensure that they are at the depth specified)
19. TOH and LD to 470' (All balanced plugs shall be tagged to ensure that they are at the depth specified)
20. Perf and establish circulation. Pump 8 sxs of 15.8# type G neat 1.15 cu/ft. yield cement
21. TOH, stand back 100' to derrick, LD remaining tubing, ND BOP
22. TIH to 100', Perf and establish circulation to surface
23. Circulate min 10 sxs of 15.8# type G neat 1.15 cu/ft. yield cement, to surface
24. TOH, RDMO, Dig up wellhead and cut off 3' below restored ground level

Clay Basin Unit 66 Proposed P&A Procedure, Version 4



- 25. Verify cement at surface, top off casing if necessary
- 26. Weld on cap with ID plate, 1/4" thick, inscribed with well location and identity
- 27. Backfill, clean location, P&A complete

Operations Engineer

Kari Phillips

Kari.Phillips@qepres.com

(303) 405-6670 (Office)

(405) 593-6105 (Mobile)

| | | |
|--|--|--|
| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL 045051B |
| | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: |
| 1. TYPE OF WELL Gas Well | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN |
| 2. NAME OF OPERATOR: QEP ENERGY COMPANY | | 8. WELL NAME and NUMBER: CLAY BASIN U 66 |
| 3. ADDRESS OF OPERATOR: 11002 East 17500 South , Vernal, Ut, 84078 | | 9. API NUMBER: 43009300670000 |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 2154 FSL 1974 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSE Section: 21 Township: 03.0N Range: 24.0E Meridian: S | | 9. FIELD and POOL or WILDCAT: CLAY BASIN |
| | | COUNTY: DAGGETT |
| | | STATE: UTAH |

11.

CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | |
|---|---|--|---|
| <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: | <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION | <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input checked="" type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> OTHER | <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: <input style="width: 100px;" type="text"/> |
| <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 11/25/2015 | | | |
| <input type="checkbox"/> SPUD REPORT Date of Spud: | | | |
| <input type="checkbox"/> DRILLING REPORT Report Date: | | | |

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

All plugging operation on the Clay Basin 66 were completed on 11/25/2015. Please see the attached daily report of plugging operations and as plugged well bore diagram.

Accepted by the
Utah Division of
Oil, Gas and Mining
FOR RECORD ONLY
 December 17, 2015

| | | |
|---|-------------------------------------|--|
| NAME (PLEASE PRINT) Jennifer Kester | PHONE NUMBER 303 308-3089 | TITLE Regulatory Affairs Analyst |
| SIGNATURE N/A | | DATE 12/16/2015 |



Time Log Detail with Daily Operation Copy 1

Well Name: CLAY BASIN UNIT NO. 66

Well Header

| | | | | |
|-------------------------------------|---------------------|----------------------------|--------------------------------|---|
| Well Name CLAY BASIN UNIT NO. 66 | API 43-009-30067 | Unique Well ID UT100734 | Ground Elevation (ft) 6,359 | Current Elevation 6,389.00, SST 88 - KB 30 |
|-------------------------------------|---------------------|----------------------------|--------------------------------|---|

Time Log

| Start Date | Com |
|------------------|--|
| 11/19/2015 06:00 | Start to move equipment on to location. |
| 11/20/2015 06:00 | Spot Magna WOR and GCS FBE w/flare stack. Could not raise derrick due to gusting wind. |
| 11/21/2015 06:00 | Travel to location. |
| 11/21/2015 08:00 | MIRU Cameron and open ECD w/N2 and place cap on stem to keep valve open. RD Cameron. |
| 11/21/2015 08:30 | MIRU E&E SLU. RIH and latch onto flow thru plug set in X-nipple @ 8,825'. POOH. RDMO E&E SLU. SITP=450 psi. |
| 11/21/2015 11:00 | Magna WOR raised derrick and set guide wires. |
| 11/21/2015 13:00 | MIRU CTS pump truck and killed well w/67 bbls 10 ppg kill fluid. SD and pressure bled down to 0 psi. RD CSI pump truck. |
| 11/21/2015 15:00 | RU Cameron and set back pressure valve. ND 2 3/8" 5K production tree. NU Cameron 7 1/16" 5K master valve. NU Weatherford 7 1/16" 5K double gate BOP with 7 1/16" 5K Hydril. |
| 11/21/2015 16:30 | RU ETS test unit and test blind rams to 4,500 psi for 10 min. Good test. Pull Cameron back pressure valve. Test 2 3/8" pipe rams to 5,000 psi for 10 min. Good test. Test Hydril to 3,000 psi for 10 min. Good test. RD ETS test unit. |
| 11/21/2015 17:00 | Magna WOR set floor. Secure well and SDFN. |
| 11/22/2015 06:00 | Travel to location. |
| 11/22/2015 08:00 | RU fig floor and blow down tbg. Pull Cameron tbg hanger, Hydril pin to pin X-over, tbg (291 jts of 2 3/8" 4.7#/ft Hydril 533) and BHA (X-over, X-nipple, 2 3/8" packer, 2 3/8"tbg pup jt, XN nipple and WL guide). POOH. While POOH killed well five times pumping a total of 238 10 #/gal kill fluid. |
| 11/22/2015 17:00 | MIRU OWP ELU and RIH set 4 1/2" CICR @ 8,772". POOH. RDMO OWP ELU. Secure well and SDFN |
| 11/23/2015 06:00 | Travel to location. |
| 11/23/2015 08:00 | MU and RIH w/Weatherford stinger, X-over and 288 jts of 2 3/8" 4.7 #/ft Hydril 533 (EOT depth @ 8,717'). RU Magna rig pump and circulated hole w/ 130 bbls of 9# brine w/ corrosion inhibitor. SD. Pressure test csg to 1,000 psi. (good test). |
| 11/23/2015 13:30 | MU and RIH w/ 2 jts of of 2 3/8" 4.7 #/ft Hydril 533, X-over, 1-10', 1-8' and 1-6' 4.7#/ft EUE tbg and sting into retainer. |
| 11/23/2015 14:00 | MIRU HES cement crew. Test to 4,000 psi. Pressure up annulus to 500 psi. Pump 90 sx EconoCem. Dispace w/ 29 bbls wtr 70 sx below retainer and pull out of retainer. Pump 2 bbls out of tbg to balance plug 20 sx) above retainer as per BLM rep (Allan Walker). SD and pull 8 stands of tbg (EOT @ 8,292'). Reverse out w/ 50 bbls wtr. Show of cement at surface. SD. |
| 11/23/2015 17:30 | POOH an additional 15 stands, leaving 246 jts in the hole (EOT @ 7,383'). Secure well. |
| 11/23/2015 18:30 | RD HES. SDFN. |
| 11/24/2015 06:00 | Travel to location. |
| 11/24/2015 08:00 | RIH w/ 67 jts 2/3/8" 4.7 #/ft Hydril 533. POOH 224 jts tbg and lay down Weatherford stinger. RIH w/ 224 jts 2/3/8" 4.7 #/ft Hydril 533. EOT @ 6,805'. Break circulation. Pump 5 bbls fresh wtr, 20 sks cement and 2 bbls fresh wtr. Displace w/ 23 bbls 9# brine w/corrosion inhibitor. TOC @ 6,524'. Lay down jts 2/3/8" 4.7 #/ft Hydril 533. EOT @ 5,659'. Break circulation, pump 2 bbls fresh wtr, 40 sks cement, 2 bbls fresh wtr. Displace w/ 17 bbls 9# brine w/corrosion inhibitor. TOC @ 5,096'. Lay down 114 jts 2/3/8" 4.7 #/ft Hydril 533, (72 jts in hole), EOT @ 2,201'. Secure well SDFN. |
| 11/25/2015 06:00 | Travel to locatation. |
| 11/25/2015 07:30 | SITP=0 psi. SICP=0 psi. RU Magna Pump. Pump 2 bbsl fresh wtr, 20 sks cement, 2 bbls fresh wtr and displace w/ 5 bbls 9# wtr w/corrosion inhibitor. |
| 11/25/2015 08:30 | Lay down 54 jts 2/3/8" 4.7 #/ft Hydril 533. Stand back 18 jts in case of no circulation. Fill 4 1/2" csg w/ 9# str. |
| 11/25/2015 10:00 | MIRU OWP ELU. RIH and perf 6 holes, 120 deg phasing, 0.38" dia. POOH. RDMO ELU. |



Time Log Detail with Daily Operation Copy 1

Well Name: CLAY BASIN UNIT NO. 66

Time Log

| Start Date | Com |
|------------------|--|
| 11/25/2015 11:00 | RIH w/ 18 jts 2/3/8" 4.7 #/ft Hydril 533. POOH and lay down tbg. |
| 11/25/2015 11:30 | ND BOP. |
| 11/25/2015 12:00 | Lay down Magna rig derrick due to wind picking up. |
| 11/25/2015 13:00 | Pump 86 sks cement 4 1/2" csg X 7" annulus to surface. Close 7" csg valve. Pump 83 sks 7" csg X 9 5/8" annulus to surface. |
| 11/25/2015 15:30 | Cut wellhead off 3' below ground level. Top off w/ 6 sks cement to surface. Weld P&A plate on. Back fill hole. P&A complete. |
| 11/29/2015 06:00 | Travel to location. |
| 11/29/2015 09:00 | MIRU Western Hydrovac, Buggy Water Service and High Desert Services. Heat water and clean flow back tank. RDMO. |
| 11/30/2015 06:00 | Travel to location |
| 11/30/2015 10:00 | MS moved auxiliary equipment off of location. Rain for Rent moved open top tank off. |
| 12/1/2015 06:00 | Magna Energy traveled to location to pick up WOR and pump. |

Clay Basin Unit No. 66

API 43-009-30067

2,154' FSL & 1,974' FEL Sec. 21-T3N-R24E SLB&M

Daggett Co., UT

KB 6388'

GL 6358'

Well Status: P&A

*WBD not to scale

Revised: 12/2/2015

By: KP

Surface Casing:

12-1/4" Hole

9-5/8", 36#, J-55 @ 528'

Intermediate Casing:

8-3/4" Hole

7", 32#, L-80 @ 6,526'

Production Casing:

6" Hole

4-1/2", 15.1#, L-80 @ 9,855'

Frontier @ 5220'

Dakota @ 5590'

Nugget @ 6680'

Perforations: 6 SPF, 60° Phase

Top (ft, KB) Btm (ft, KB)

8,872.00 8,892.00

8,892.00 8,912.00

8,912.00 8,927.00

8,927.00 8,942.00

8,942.00 8,962.00

8,962.00 8,982.00

8,982.00 9,002.00

9,002.00 9,022.00

9,022.00 9,042.00

9,042.00 9,057.00

9,057.00 9,072.00

PBTD @ 9,852'

TD @ 9,863'

P&A Summary

MIRU

NDWH NUBOP

POOH w/ tubing and BHA

RIH with 4-1/2" CICR and set @ 8772'

Existing perfs - Establish injection rate/pressure

squeeze 70 sx below, spot 20 sx on top of CICR

TOC @ 8491'

balance plug from 6524' to 6805'

20 sx

balance plug from 5096' to 5659'

40 sx

balance plug from 1935' to 2201'

20 sx

Perf 4 holes @ 560'

Surface shoe, 86 sxs in 4-1/2" x 7"

83 sxs in 4-1/2" x 9-5/8"

TOC @ surface. Top off with 6 sxs

Cut of WH and weld on dry hole marker